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ANNUAL REPORTS, WAR DEPARTMENT
FISCAL YEAR ENDED JUNE 30, 1912

REPORT OF THE

SURGEON GENERAL

U. S. ARMY

TO THE SECRETARY OF WAR

1912

WASHINGTON
GOVERNMENT PRINTING OFFICE
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REPORT OF THE SURGEON GENERAL OF THE ARMY.

War Department,
Office of the Surgeon General,
Washington, August 20, 1912.

Sir: I have the honor to submit herewith a report upon the work of the Medical Department of the Army, together with a financial statement for the fiscal year ending June 30, 1912, and a study of the health and sanitary conditions of the Army for the calendar year 1911.

HEALTH OF THE ARMY.

OFFICERS.

The mean strength of officers was 4,225, as obtained from the reports of sick and wounded of the Medical Department, and 4,515 from the office of The Adjutant General. There were 2,522 admissions, 20 deaths, and 113.70 constantly noneffective from all causes, equal to ratios of 596.92, 4.43, and 26.91 as compared with ratios of 596.54, 3.40, and 28.35 per 1,000 for the year 1910. The constantly noneffective rate was thus slightly lower than for 1910, but the death and admission rates were higher.

The principal causes of admission in the order of their importance were influenza, 42.37; diarrhea and enteritis, 40.47; bronchitis, 40; malarial fevers, 23.20; dengue, 15.38, and appendicitis, 13.96 per 1,000.

OFFICERS RETIRED.

Thirty officers were retired on account of disability during the year, making a rate of retirement for disability of 6.64 per 1,000, as compared with 8.38 for 1910. The discharge rate for disability in enlisted men was 13.85.

The following table shows the principal causes for which retirements were made and the rank and age of the officers retired:

Table No. 1.—*Retirement of officers, United States Army, year 1911, for disability, by causes and rank, grouped by ages.*

	Total.		Ages of officers, quinquennial groups.								
	Number.	Ratio per 1,000 of all officers.	24 years and under.	25 to 29 years.	30 to 34 years.	35 to 39 years.	40 to 44 years.	45 to 49 years.	50 to 54 years.	55 to 59 years.	60 years and over.
CAUSES OF RETIREMENT.											
Mental alienation	5	1.11			1	1	2	1			
Pulmonary tuberculosis	4	.89		1	1	1	1				
Organic heart disease	4	.89				1	1	2			
Brights disease	4	.89				1		1		1	1
Deafness	3	.66				1			1	1	
Chronic neurasthenia, cerebral	2	.44							2		
Chronic dysentery	1	.22							1		
Partial paralysis, specific	1	.22		1							
Anemia	1	.22			1						

TABLE No. 1.—*Retirement of officers, United States Army, year 1911, for disability, by causes and rank, grouped by ages*—Continued.

	Total.		Ages of officers, quinquennial groups.								
	Number.	Ratio per 1,000 of all officers.	24 years and under.	25 to 29 years.	30 to 34 years.	35 to 39 years.	40 to 44 years.	45 to 49 years.	50 to 54 years.	55 to 59 years.	60 years and over.
CAUSES OF RETIREMENT—con.											
Bronchial asthma	1	.22						1			
Chronic intestinal catarrh	1	.22									1
Hernia, inguinal (result of operation)	1	.22									1
Paralysis sphincter ani (result of operation)	1	.22				1					
Loss of leg, railroad accident	1	.22				1					
RANK IN SERVICE.											
Colonel	3	.66								1	2
Lieutenant colonel	2	.44						1		1	
Major	5	1.11				1	1	1	1		1
Captain	7	1.55				2		2	3		
First lieutenant	9	1.99			2	3	3	1			
Second lieutenant	4	.89		2	1	1					
Number of retirements	30	6.64		2	3	7	4	5	4	2	3
Number of officers in service	4,515		259	909	961	1,025	584	346	220	136	75
Ratio per 1,000 of each group				2.20	3.12	6.83	6.85	14.45	18.18	14.71	40.00

The following table shows the causes of deaths of officers:

TABLE No. 2.—*Deaths of officers, United States Army, year 1911, by causes and rank, grouped by ages.*

	Total.		Ages of officers, quinquennial groups.								
	Number.	Ratio per 1,000 of all officers.	24 years and under.	25 to 29 years.	30 to 34 years.	35 to 39 years.	40 to 44 years.	45 to 49 years.	50 to 54 years.	55 to 59 years.	60 years and over.
CAUSES OF DEATH.											
Chronic nephritis (interstitial, 4; parenchymatous, 1)	5	1.11		1				2		1	1
Fracture of skull (fall from horse, 1; aeroplane accident, 1)	2	.44			1					1	
Gunshot wounds, suicidal	2	.44		1		1					
Malarial fever, aestivo autumnal	1	.22				1					
General miliary tuberculosis	1	.22					1				
Apoplexy	1	.22									1
Cardiac dilatation	1	.22								1	
Pneumonia	1	.22				1					
Appendicitis	1	.22						1			
Acute nephritis	1	.22						1			
Incised wounds (killed by Moro running amuck)	1	.22			1						
General freezing (caught in blizzard, away from post)	1	.22			1						
Acute chloral hydrate poisoning (accidental overdose)	1	.22			1						
Acute ptomaine poisoning	1	.22				1					
RANK IN SERVICE.											
Colonel	2	.44									2
Lieutenant colonel	3	.66								3	
Major	1	.22						1			
Captain	7	1.55			1	3	1	2			
First lieutenant	5	1.11		1	2	1		1			
Second lieutenant	2	.44		1	1						
Number of deaths	20	4.43		2	4	4	1	4		3	2
Number of officers in service	4,515		259	909	961	1,025	584	346	220	136	75
Death rate per 1,000 of each group				2.20	4.16	3.90	1.71	11.56		22.06	26.67

TEST EXERCISES FOR FIELD OFFICERS.

Of the 772 officers of field rank, who were subject to the annual physical test, 27 were excused in 1911; in 7 the disability was regarded as permanent; in 2 as probably permanent; in 13 as only temporary; and 5 were excused for other reasons.

TABLE NO. 3.—*Field officers excused from physical test, year 1911.*

	Rank.			Total number excused.	Excused on account of disability.			Excused for other reasons.
	Colonel.	Lieutenant colonel.	Major.		Permanent.	Probably permanent.	Temporary.	
Infantry	1		2	3	2		1	
Cavalry			1	1			1	
Coast Artillery	1			1	1			
Engineers	3	1		4	1		2	1
Medical Department	5		4	9	1	2	4	2
Subsistence Department	1		1	2			1	1
Ordnance Department	1	1		2			1	1
Pay Department			1	1			1	
Others		2	2	4	2		2	
Total	12	4	11	27	7	2	13	5

ENLISTED MEN.

The mean enlisted strength of the Army, American troops, white and colored, for the year 1911, as reported on the monthly sick reports of the Medical Department, was 72,748, and on the returns of The Adjutant General's Office, 73,023. The former represents the strength of the commands from which the sick returns were made, and was used in calculating all ratios except those for deaths and discharges. As all deaths and discharges were reported, even of those absent from a command, the total strength as obtained from The Adjutant General was used in calculating ratios pertaining to those headings. This shows an increase in strength over the year 1910, for which the medical returns showed 71,534 and The Adjutant General's Office, 71,814.

During the year 1911 American troops were stationed in the United States proper, the Philippine Islands, Alaska, Hawaii, and the Canal Zone. Native troops served in Porto Rico and the Philippines.

Statistics for the native troops, Porto Rican and Filipino, have been separately compiled, and when reference is made to the "Army" in this report the American Army proper, white and colored troops, is meant.

As in many diseases, notably the venereal and malarial, the same soldier is often admitted several times on account of the same case of illness, the total number of admissions is necessarily considerably greater than the actual number of cases. The extent of this discrepancy for diseases and injury is 6.02 per cent, as shown in the table following, in which, however, only those diseases are shown where the difference between admissions and cases was 10 or more.

TABLE NO. 4.—*Admissions and cases compared, for the United States Army, year 1911.*

	Admissions and cases (men) compared.			
	Admissions.	Cases (men).	Excess of admissions over cases.	Percentage of admissions deducted to show cases.
Typhoid vaccination	1,302	1,201	101	7.76
Malarial fever	1,832	1,627	205	11.19
Tonsillitis	3,625	3,471	154	4.25
Influenza	1,201	1,167	34	2.83
Dysentery	302	271	31	10.26
Dengue	1,453	1,411	42	2.89
Vaccinia	1,580	1,564	16	1.01
Tuberculosis (all)	272	258	14	5.15
Syphilis	3,574	2,919	655	18.33
Chancroids	2,561	2,390	171	6.68
Gonorrhea	7,333	6,585	748	10.20
Acute articular rheumatism	426	390	36	8.45
Rheumatism, articular, chronic	267	249	18	6.74
Alcoholism	1,563	1,372	191	12.22
Epilepsy	126	107	19	15.08
Neuralgia	330	311	19	5.76
Neurasthenia	129	106	23	17.83
Diseases of the eye and its annexa	797	764	33	4.14
Diseases of the ear and its annexa	575	543	32	5.57
Varicocele	273	259	14	5.13
Varicose veins	61	50	11	18.03
Hemorrhoids	488	469	19	3.89
Lymphadenitis, nonvenereal	415	386	29	6.99
Coryza	979	963	16	1.63
Acute bronchitis	2,149	2,093	56	2.61
Asthma	82	53	29	35.37
Diseases of the teeth, gums, and alveoli	587	565	22	3.75
Diseases of the pharynx	825	814	11	1.33
Dyspepsia	1,373	1,302	71	5.17
Gastritis	658	626	32	4.86
Diarrhea, acute	1,265	1,210	55	4.35
Enteritis	905	871	34	3.76
Intestinal parasites	261	245	16	6.13
Hernia	306	280	26	8.50
Constipation	1,280	1,238	42	3.28
Appendicitis	453	424	29	6.40
Furuncle	1,624	1,436	188	11.58
Acute abscess, phlegmon	954	907	47	4.93
Corns and warts	234	222	12	5.13
Ingrowing nails	376	358	18	4.79
Dermatitis from poisonous plants	271	254	17	6.27
Eczema and pemphigus	146	131	15	10.27
Scabies	291	275	16	5.50
Synovitis	182	156	26	14.29
Muscular rheumatism and myalgia	1,297	1,216	81	6.25
Congenital malformations	209	182	27	12.92
Debility following operation and disease	186	176	10	5.38
Diseases, except as shown in detail	8,597	8,364	233	2.71
Total for diseases	55,975	52,231	3,744	6.69
Total for injuries	12,098	11,743	355	2.93
Grand total	68,073	63,974	4,099	6.02

CONSTANTLY NONEFFECTIVE RATE.

The constantly noneffective rate, which is the true measure of the loss in efficiency of the Army from sickness and injury, was 33.28 per 1,000, as compared with 35.93 for 1910, 41.48 for 1909, 42.68 for 1908, and 46.17 for 1907. This is the lowest noneffective rate in the history of the Army.

TOTAL ADMISSIONS TO SICK REPORT.

The total number of admissions to sick report was 68,073, equal to an admission rate of 935.74 per 1,000, as compared with 949.76 for

the previous year and 1,062.99 for 1909. It is thus less than one admission for each soldier during the year, and is the lowest rate in the history of the Army.

DEATHS FROM ALL CAUSES.

The deaths from all causes numbered 348, of which 194 were from disease. The death rate for all causes was 4.77 for the year 1911 and 2.66 for disease, as compared with 4.46 and 2.44, respectively, for the preceding year. The total death rate and that from disease are both the lowest on record in this office except those for the year 1910.

DISCHARGES FOR DISABILITY.

The discharges for disability numbered 1,011, the rate being 13.85, as compared with 14.02 for 1910, 16.84 for 1909, and 18.48 for 1908.

ADMISSION RATES FOR DISEASE.

The ratio for 1911 was 769.44 per 1,000 of mean strength; for the previous year, 766.06, and for the decade 1,137.84. This is the lowest admission rate for disease for any year in the history of the Army except that for the year 1910.

The Table No. 5 gives the general rates for the Army as far as they can be obtained since the year 1818, when the office of the Surgeon General was first established as a bureau of the War Department.

Table No. 5.—General Rates for the Army, 1819 to 1911.

Year.	Strength.	Admissions.			Constant-noneffective.			Discharges.			Deaths.			Remarks.
		Disease.	Injury.	Total.	Disease	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	
1819	8,688	1,311.9	112.8	1,424.7	.....	.....	.....	.....	.....	15.7	.....	.....	27.4	
1820	8,942	2,019.7	136.9	2,156.6	.....	.....	.....	.....	.....	19.0	.....	.....	64.4	Scurvy caused 190 deaths out of 576.
1821	5,746	2,520.2	222.1	2,742.3	.....	.....	.....	.....	.....	46.8	.....	.....	55.0	
1822	5,211	1,986.8	223.4	2,210.1	.....	.....	.....	.....	.....	16.1	.....	.....	33.4	
1823	5,949	1,867.9	222.4	2,090.3	.....	.....	.....	.....	.....	19.3	.....	.....	32.6	
1824	5,779	1,995.5	268.6	2,264.1	.....	.....	.....	.....	.....	18.7	.....	.....	20.1	
1825	5,719	2,324.4	263.3	2,587.7	.....	.....	.....	.....	.....	17.7	.....	.....	24.3	
1826	5,809	2,546.4	263.0	2,809.4	.....	.....	.....	.....	.....	24.8	.....	.....	27.7	
1827	5,722	2,172.1	249.7	2,421.9	.....	.....	.....	.....	.....	18.7	.....	.....	26.0	
1828	5,529	2,626.7	285.0	2,911.7	.....	.....	.....	.....	.....	29.7	.....	.....	29.1	
1829	6,169	2,399.6	205.7	2,605.3	.....	.....	.....	.....	.....	20.3	.....	.....	23.8	
1830	5,951	2,322.5	230.5	2,553.0	.....	.....	.....	.....	.....	27.6	18.5	0.8	19.3	Year ending Dec. 31.
1831	5,869	2,692.1	242.3	2,934.4	.....	.....	.....	.....	.....	20.4	22.7	0.5	23.2	
1832	6,102	2,341.5	235.7	2,577.2	.....	.....	.....	.....	.....	23.6	12.5	0.3	12.8	First six months.
1833	6,412	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	Records not found.
1834	6,824	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
1835	7,151	2,132.9	146.2	2,279.1	.....	.....	.....	.....	.....	14.2	19.4	0.7	20.1	Last nine months. Year ending Sept. 30.
1836	6,283	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
1837	7,834	.....	.....	2,418.88	.....	.....	.....	.....	.....	.....	23.87	0.89	24.76	
1838	8,653	2,620.0	224.0	2,844.0	.....	.....	.....	.....	.....	54.7	33.0	2.9	35.9	Dysenteries caused 75 deaths and diarrhea 62 out of a total of 311.
1839	8,950	2,220.2	265.6	2,485.8	.....	.....	.....	.....	.....	14.6	22.4	1.5	23.9	
1840	10,116	2,475.9	110.8	2,586.7	.....	.....	.....	.....	.....	21.3	23.4	1.7	25.1	
1841	9,748	3,475.1	370.7	3,846.8	.....	.....	.....	.....	.....	32.8	37.8	1.9	39.7	Dysenteries caused 93 and diarrhea 44 out of a total of 387.
1842	10,000	3,017.1	242.5	3,269.6	.....	.....	.....	.....	.....	26.0	29.1	1.2	30.3	Yellow fever 28 out of total 303.
1843	A. G. 9,863	2,451.2	268.1	2,719.3	.....	.....	.....	.....	.....	31.3	15.8	0.4	16.2	
1844	8,600	2,156.9	282.9	2,439.8	.....	.....	.....	.....	.....	24.2	10.9	0.2	11.2	
1845	8,590	2,317.7	301.2	2,618.9	.....	.....	.....	.....	.....	19.6	8.5	0.6	9.1	
1846	9,083	.....	.....	2,937.9	.....	.....	.....	.....	.....	24.9	.....	.....	27.1	Diarrhea caused 25 and dysentery 38 deaths out of a total of 246.
1847	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	Period of Mexican War, no reliable statistics for this period.
1848	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
1849	9,148	.....	.....	3,062.2	.....	.....	.....	.....	.....	76.7	.....	.....	80.2	Yellow fever caused 52 deaths, diarrhea 151, and cholera 307.
1850	8,970	.....	.....	2,684.4	.....	.....	.....	.....	.....	35.9	.....	.....	32.8	
1851	9,242	.....	.....	2,735.2	.....	.....	.....	.....	.....	29.4	.....	.....	32.7	Cholera caused 91 deaths out of a total of 302.
1852	9,203	2,498.4	301.2	2,799.6	.....	.....	.....	.....	.....	21.9	22.6	2.3	24.9	
1853	9,994	2,643.8	315.5	2,959.3	.....	.....	.....	.....	.....	22.7	26.7	1.3	28.0	Cholera 94 deaths out of a total of 280.
1854	8,095	2,705.2	382.8	3,088.1	.....	.....	.....	.....	.....	22.4	27.7	4.2	31.9	Yellow fever 83 deaths out of a total of 258.
1855	9,367	.....	.....	3,248.4	.....	.....	.....	.....	.....	20.4	.....	.....	33.0	Cholera 104 deaths, yellow fever 20 out of a total of 309.

1856	14,434	2,890.3	318.7	3,209.0						17.5	22.2	2.6	24.8	Cholera caused 58 deaths, diarrhea 38, dysenteries 36, out of a total of 358. Typhoid fever first diagnosed this year.
1857	12,701			2,817.0						25.1			13.5	
1858	14,510	2,286.1	345.7	2,631.8						20.4	12.5	1.9	14.3	
1859	15,510	2,025.5	334.2	2,359.7						15.7	14.1	1.8	15.9	Yellow fever caused 72 deaths and typhoid 15 out of a total of 247.
1860	13,531	1,882.9	356.4	2,239.3						14.5	8.6	1.6	10.2	
1861	13,028			2,370.2									9.2	
1862														Period of Civil War.
1863														
1864														
1865														
1866														
1867	47,665	2,737.00	239.50	2,976.50			56.21			13.0			51.6	Cholera caused 1,310 deaths.
1868	50,031	2,647.80	274.30	2,922.10	55.12	7.54	62.66			21.5	28.3	4.1	32.4	Yellow fever caused 452 deaths and cholera 228.
1869	41,083	2,272.10	265.10	2,537.20	48.95	8.67	57.62			27.5	10.4	3.2	13.6	
1870	32,429	1,829.10	292.10	2,121.20	40.15	9.10	49.25			26.2	9.3	4.3	13.6	
1871	31,973	1,803.80	293.50	2,097.30	40.47	10.01	50.48			36.3	12.5	5.5	18.0	
1872	26,595	1,624.50	296.50	1,921.00	38.84	9.40	48.24			34.7	11.7	4.1	15.8	
1873	27,364	1,645.30	294.20	1,939.50	39.18	9.83	49.01			34.9	10.7	6.3	17.0	
1874	28,144	1,516.10	276.30	1,792.40	36.92	9.98	46.90			33.2	11.5	4.4	15.9	
1875	24,143	1,419.30	263.70	1,683.00	34.54	9.19	43.74			28.1	8.0	3.5	11.4	
1876	23,683	1,496.30	235.90	1,732.20	35.51	8.70	44.21			25.9	8.3	16.8	25.1	247 officers and men killed in battle of Little Big Horn River, Dakota (Custer's massacre).
1877	25,359	1,510.30	245.20	1,755.50	34.31	10.06	44.36			31.7	7.7	3.8	11.5	
1878	22,689	1,297.90	218.10	1,516.10	31.82	9.65	41.47			28.4	6.2	6.5	12.7	
1879	23,663	1,527.15	291.72	1,818.87	34.78	9.25	44.03			30.38	7.48	4.94	12.42	
1880	24,468	1,518.02	246.04	1,764.06	34.29	9.65	43.93			32.37	6.01	4.82	10.83	
1881	23,504	1,536.04	253.36	1,789.40	34.89	9.27	44.16			34.93	6.64	3.79	10.42	
1882	23,043	1,468.28	223.28	1,691.57	36.41	8.81	45.22			41.05	6.81	3.65	10.46	
1883	22,539	1,580.15	257.95	1,838.10	39.22	9.76	48.98	35.23	5.86	41.09	8.56	3.51	12.07	
1884	24,035	1,257.00	275.00	1,532.00	34.85	9.46	44.31	31.87	4.24	36.11	7.45	3.49	10.94	
1885	24,138	1,121.00	246.00	1,367.00	31.71	9.10	40.81	28.50	2.86	31.36	4.76	2.78	7.54	
1886	23,572	1,037.00	226.00	1,263.00	30.82	7.73	38.55	22.8	2.1	24.9	5.7	3.1	8.8	
1887	23,841	1,001.97	244.91	1,246.88	33.70	8.68	42.38	24.58	2.50	27.08	5.65	2.47	8.12	
1888	24,726	1,027.87	242.86	1,270.73	33.55	8.36	41.91	24.31	3.44	27.75	6.09	2.06	8.15	
1889	25,008	1,066.30	248.72	1,315.02	35.57	8.55	44.12	19.61	3.18	22.79	3.95	2.38	6.33	
1890	24,234	1,140.54	243.71	1,384.25	34.86	7.85	42.71	2.32	20.69	23.01	5.25	3.45	8.69	
1891	23,269	1,115.86	248.91	1,364.78	33.41	8.60	42.01	14.47	2.76	17.23	5.03	3.02	8.05	
1892	24,203	1,015.66	254.76	1,270.42	31.26	8.34	39.60	15.41	2.94	18.35	4.36	2.08	6.44	
1893	25,287	1,045.76	243.29	1,289.04	32.24	7.92	40.15	12.36	2.57	14.93	4.01	2.89	6.91	
1894	25,376	845.52	244.21	1,089.73	26.60	7.88	34.49	10.41	2.89	13.30	4.55	2.13	6.69	
1895	25,204	837.53	272.69	1,110.22	25.43	8.46	33.89	6.81	2.34	9.15	3.55	1.61	5.16	
1896	25,119	830.65	279.75	1,110.39	25.23	8.73	33.97	8.13	2.02	10.15	3.83	1.62	5.44	
1897	25,417	896.53	290.08	1,186.61	26.73	9.12	35.85	7.60	2.01	9.61	3.14	1.97	5.11	
1898	46,635	1,937.71	209.23	2,146.94	69.09	13.74	82.83	7.40	4.18	11.58	22.00	5.55	27.55	Regulars.
1898	101,160	2,037.20	108.63	2,145.83				12.60	2.28	14.89	26.33	1.85	28.18	Volunteers.
1899	64,446	2,125.74	216.52	2,342.26	66.62	6.60	73.22	21.65	5.77	27.42	12.75	5.90	18.65	Regulars.
1899	41,100	1,765.82	154.77	1,920.49				11.02	2.43	13.45	10.20	7.88	18.08	Volunteers.
1900	68,955	1,820.94	209.05	2,029.99				21.13	5.86	26.99	11.62	4.99	16.61	Regulars.

TABLE No. 5.—GENERAL RATES FOR THE ARMY, 1819 TO 1911—Continued.

Year.	Strength.	Admissions.			Constant-noneffective.			Discharges.			Deaths.			Remarks.
		Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	
1900	31,434	2,761.79	168.23	2,930.01	.....	.....	.....	10.21	2.77	12.98	24.94	11.26	36.20	Volunteers.
1901	81,885	1,622.13	202.54	1,824.67	.....	.....	.....	16.32	3.77	20.09	9.04	4.51	13.54	Regulars.
1901	10,606	1,427.68	108.52	1,536.20	.....	.....	.....	9.62	9.24	18.86	13.77	3.21	16.97	Volunteers.
1902	80,778	1,514.29	202.22	1,716.51	.....	.....	.....	19.78	3.54	23.32	12.78	2.71	15.49	
1903	67,643	1,228.45	222.68	1,451.13	.....	.....	.....	21.61	1.77	23.39	7.02	2.28	9.03	
1904	60,139	1,113.45	241.44	1,354.89	42.83	6.97	49.80	20.49	2.41	22.90	3.87	2.88	6.75	
1905	56,901	1,058.42	237.55	1,295.97	41.62	7.31	48.93	22.34	2.66	25.00	3.52	2.77	6.28	
1906	58,572	1,053.08	223.80	1,276.88	42.70	7.09	49.79	23.46	2.54	26.00	3.28	2.83	6.11	
1907	54,949	1,005.06	213.20	1,218.26	39.61	6.56	46.17	17.82	2.33	20.15	3.44	2.37	5.81	
1908	67 515	962.88	225.15	1,188.03	36.24	6.44	42.68	16.51	1.97	18.48	3.48	2.65	6.13	
1909	75,399	865.92	197.07	1,062.99	35.62	5.86	41.48	15.20	1.64	16.84	3.02	1.88	4.91	
1910	71,534	766.06	183.70	949.76	30.52	5.42	35.93	12.55	1.48	14.02	2.44	2.02	4.46	
1911	72,748	769.44	166.30	935.74	28.23	5.05	33.28	12.28	1.56	13.85	2.66	2.11	4.77	

ADMISSION RATES FOR EXTERNAL CAUSES.

There were 149 admissions for gunshot wounds, including 5 shot in action. There were 52 deaths from this cause, including 3 killed in action, 3 shot by sentry on guard, 31 suicides, and 8 homicides.

Wounds other than gunshot (contused, lacerated, incised, and punctured) caused 2,586 admissions. Four of these wounds were received in action. From these wounds there were 10 deaths, including one killed in action, and 14 discharges.

Drowning caused 24 (2 suicidal), and poisoning, acute, 9 deaths (5 suicidal). There were 46 suicides, 18 homicides, 16 deaths caused by railroad accidents, 10 by vehicles and horses, and 9 by falling from high places. There were no deaths from freezing or sunstroke.

NONEFFECTIVE RATES FOR DISEASE.

Chart A, giving the total noneffective rates for diseases since 1888 for the Army, shows in a striking way the increase in sickness due to the exposures to tropical climates and conditions consequent upon the occupation of new territory during and since the Spanish-American war. It also shows a steady diminution in sickness after the first year of colonial expansion in 1898, with the rapid advance of our knowledge of tropical diseases and preventive medicine and the establishment of more sanitary conditions of living in our tropical possessions.

The progressive improvement since 1898 has been due chiefly to sanitary control of the infectious diseases—malarial fevers, typhoid, and dysentery. It would be even greater than at present if it had not been offset to a considerable extent by the formidable increase in the venereal diseases and tuberculosis.

DISCHARGES.

All discharges are now made in the United States, except for the Porto Rican regiment and the Filipino Scouts, but the discharges and deaths occurring in the United States of soldiers invalided home from foreign service, and whose organizations were serving abroad at the time, have been credited to the country from which the soldier was invalided. There remains, however, a considerable number of deaths and discharges which can only be assigned to the place where they occur, though the diseases which led to these terminations were contracted abroad.

INFLUENCE OF STATION ON TROOPS.

Regarding the comparative healthfulness of various countries in which the American troops were serving during the year, it will be noted in Table No. 6 that Alaska had, as usual, the lowest admission, discharge and noneffective rates; the United States, continental, the second lowest admission and the highest discharge rate; the Philippines the second lowest discharge rate and the highest admission, and second highest noneffective rate; and Hawaii, the lowest death rate and the highest noneffective rates.

The charts on pages 24 and 25 give a summary of the health of the Army by countries in which it was stationed during the year.

TABLE No. 6.—*Numerical view of the effect of disease and injury on United States troops serving at home and abroad, in the year 1911, compared with corresponding data for the year 1910, by countries.*

ABSOLUTE NUMBERS.

American troops (enlisted men).		Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Noneffective from sickness.	
			Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Days treated.	Constantly noneffective.
United States	1911	55,240	49,042	40,095	8,947	833	736	97	262	157	105	1,095	893	202	633,063	1,734.42
	1910	55,680	50,070	39,841	10,229	851	763	88	246	128	118	1,097	891	206	690,036	1,890.51
Alaska	1911	1,119	468	316	152	5	3	2	7	6	1	12	9	3	5,369	14.47
	1910	1,081	489	346	143	9	7	2	3	3	.....	12	10	2	6,711	18.39
Philippine Islands	1911	12,454	15,172	12,798	2,374	145	131	14	66	24	42	211	155	56	196,140	537.37
	1910	12,277	15,256	12,869	2,387	125	109	16	64	38	26	189	147	42	203,684	558.04
Hawaii	1911	2,014	2,176	1,629	547	28	27	1	6	2	4	34	29	5	32,726	89.66
	1910	1,220	1,232	890	342	21	21	.....	3	2	1	24	23	1	22,211	60.85
Canal Zone [1]	1911	204	192	167	25	.....	.....	.....	1	.....	1	1	.....	1	1,909	5.23
Army transports	1911	1,700	1,018	966	52	.....	.....	.....	6	5	1	6	5	1	14,414	39.49
	1910	1,253	884	845	39	.....	.....	.....	4	4	.....	4	4	.....	15,427	42.27
Total	1911	**72,748**	**68,073**	**55,975**	**12,098**	**1,011**	**897**	**114**	**348**	**194**	**154**	**1,359**	**1,091**	**268**	**883,646**	**2,420.95**
	1910	71,534	67,940	54,799	13,141	1,007	901	106	320	175	145	1,327	1,076	251	938,210	2,570.44
Regular Army American troops, 1901 to 1910		66,745	901,817	759,458	142,359	14,107	12,588	1,519	5,544	3,678	1,866	19,615	16,266	3,385	.....	.....
Porto Rican regiment	1911	580	609	562	47	5	4	1	4	2	2	9	6	3	6,304	17.27
	1910	591	563	487	76	9	4	5	.....	.....	.....	9	4	5	6,899	18.90
Filipino Scouts	1911	5,266	3,922	3,510	412	26	23	3	24	17	7	50	40	10	38,172	104.58
	1910	5,093	4,462	3,809	653	36	32	4	23	19	4	59	51	8	48,342	132.44

[1] First medical report began October, 1911.

American troops (enlisted men).	Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Constantly noneffective.	Days treated.	
		Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.		Each soldier.	Each case.
United States.....1911	55,240	887.80	725.83	161.97	15.00	13.26	1.75	4.72	2.83	1.89	19.72	16.09	3.64	31.40	11.46	12.91
1910	55,680	899.25	715.54	183.71	15.28	13.70	1.58	4.42	2.30	2.12	19.70	16.00	3.70	33.95	12.39	13.78
Alaska.....1911	1,119	418.23	282.40	135.84	4.47	2.68	1.79	6.26	5.36	.89	10.73	8.04	2.68	13.15	4.79	11.47
1910	1,081	452.36	320.07	132.28	7.96	6.19	1.77	2.65	2.65	.....	10.61	8.84	1.77	17.01	6.21	13.72
Philippine Islands.....1911	12,454	1,218.24	1,027.62	190.62	11.64	10.52	1.12	5.30	1.93	3.37	16.94	12.45	4.49	43.15	15.75	12.93
1910	12,277	1,242.65	1,048.22	194.43	10.14	8.84	1.30	5.19	3.08	2.11	15.33	11.92	3.41	45.45	16.59	13.35
Hawaii.....1911	2,014	1,080.44	808.84	271.60	13.90	13.41	.50	2.98	.99	1.99	16.88	14.40	2.49	44.52	16.25	15.04
1910	1,220	1,009.84	729.51	280.33	17.14	17.14	.....	2.45	1.63	.82	19.59	18.77	.82	49.88	18.21	18.03
Canal Zone [1].....1911	204	941.18	818.63	122.55	.....	.....	.....	4.90	.....	4.90	4.90	.....	4.90	25.64	9.36	9.94
Army transports.....1911	1,700	598.83	568.24	30.59	.....	.....	.....	3.53	2.94	.59	3.53	2.94	.59	23.23	8.48	14.16
1910	1,253	705.51	674.38	31.13	.....	.....	.....	2.81	2.81	.....	2.81	2.81	.....	33.73	12.31	17.45
Total.....1911	**72,748**	**935.74**	**769.44**	**166.30**	**13.85**	**12.28**	**1.56**	**4.77**	**2.66**	**2.11**	**18.62**	**14.94**	**3.67**	**33.28**	**12.15**	**12.98**
1910	71,534	949.76	766.06	183.70	14.02	12.55	1.48	4.46	2.44	2.02	18.48	14.99	3.50	35.93	13.12	13.81
Regular Army American troops, 1901 to 1910.....	66,745	1,351.13	1,137.84	213.29	20.83	18.59	2.24	8.19	5.43	2.76	29.02	24.02	5.00	.....	.....	.....
Porto Rican regiment.....1911	580	1,050.00	968.97	81.03	8.62	6.90	1.72	6.90	3.45	3.45	15.52	10.35	5.17	29.78	10.87	10.35
1910	591	952.62	824.03	128.60	15.23	6.77	8.46	.....	.....	.....	15.23	6.77	8.46	31.98	11.43	12.20
Filipino Scouts.....1911	5,266	744.78	666.54	78.24	4.94	4.37	.57	4.56	3.23	1.33	9.50	7.60	1.90	19.86	7.25	9.73
1910	5,093	876.10	747.89	128.22	6.79	6.04	.75	4.34	3.58	.75	11.13	9.62	1.50	26.01	9.49	10.83

[1] First medical report began October, 1911.

CHART A.—*Showing (for the Army) the total noneffective rate for disease, by years, since 1888.*

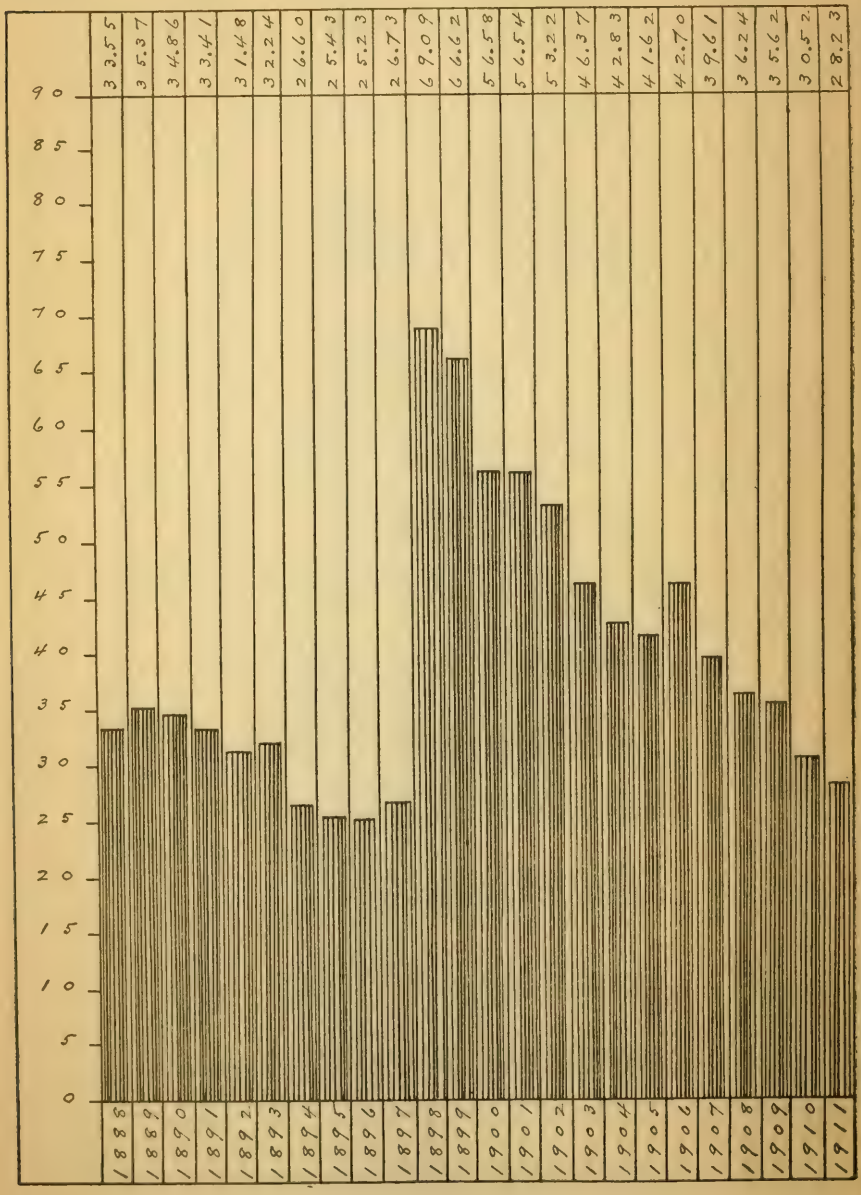


CHART B.—*Showing (for the Army) the total death, discharge, and noneffective rates for disease, by years, since 1888.*

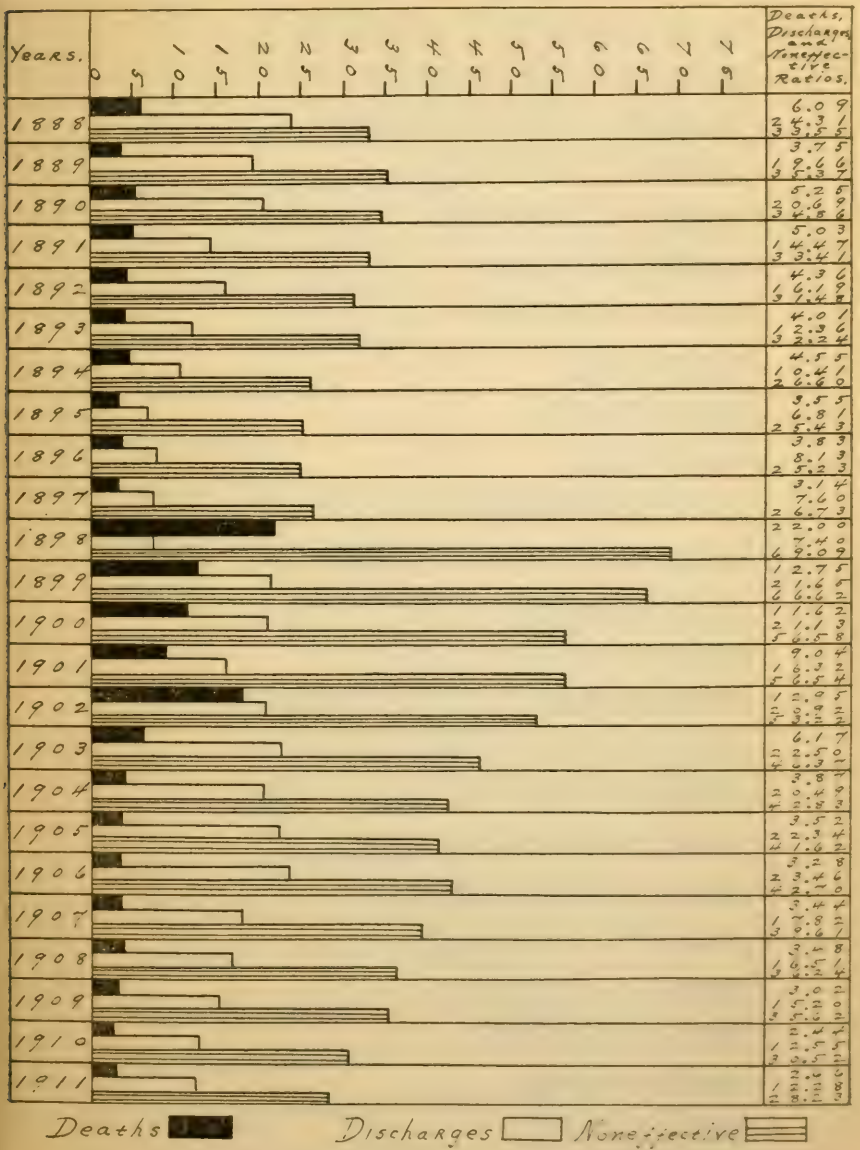


CHART C.—*Showing (for the Army) the rates for total losses, all causes, by years, since 1888.*

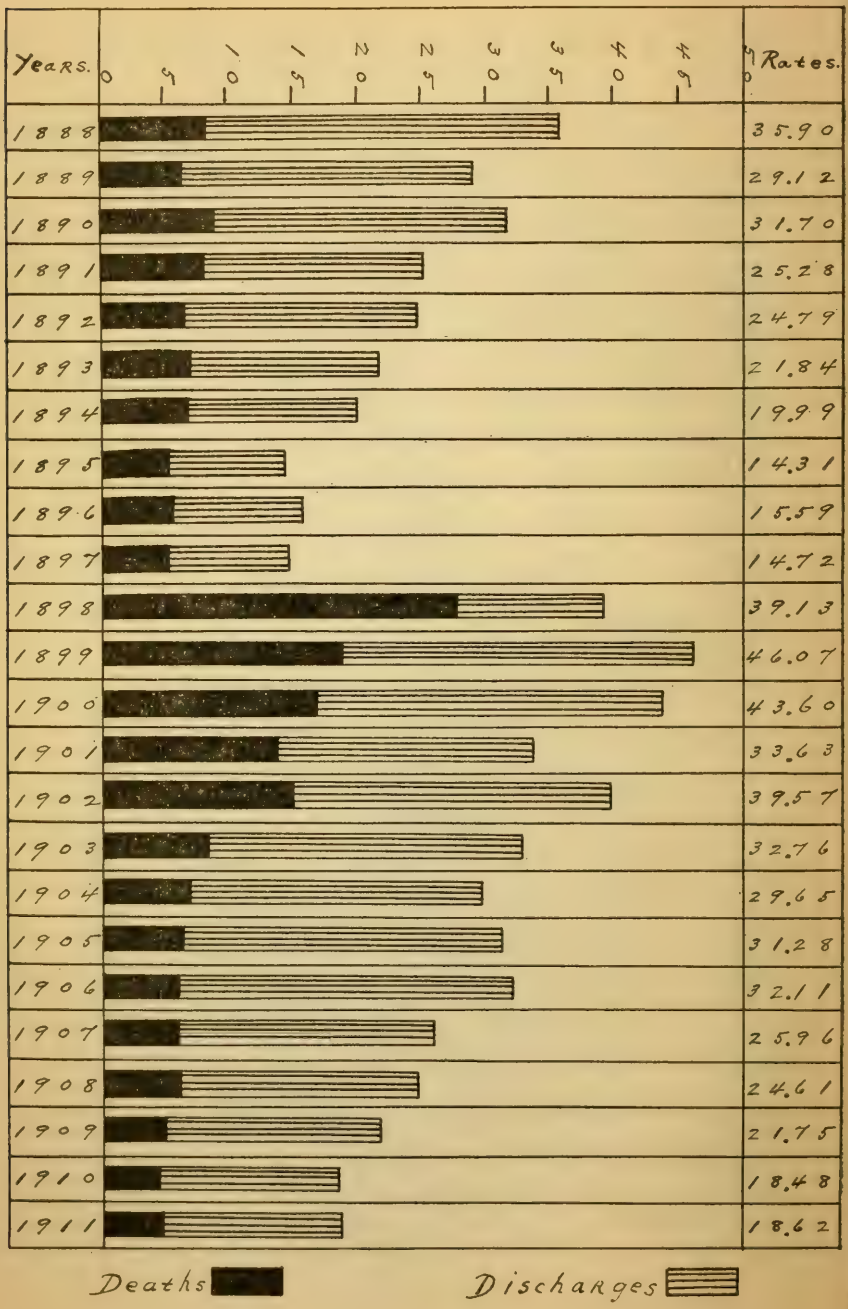


CHART D.—*Showing (for the Army) the death rates for the three diseases having the highest rates for the year 1911 in comparison with the same diseases since 1888.*

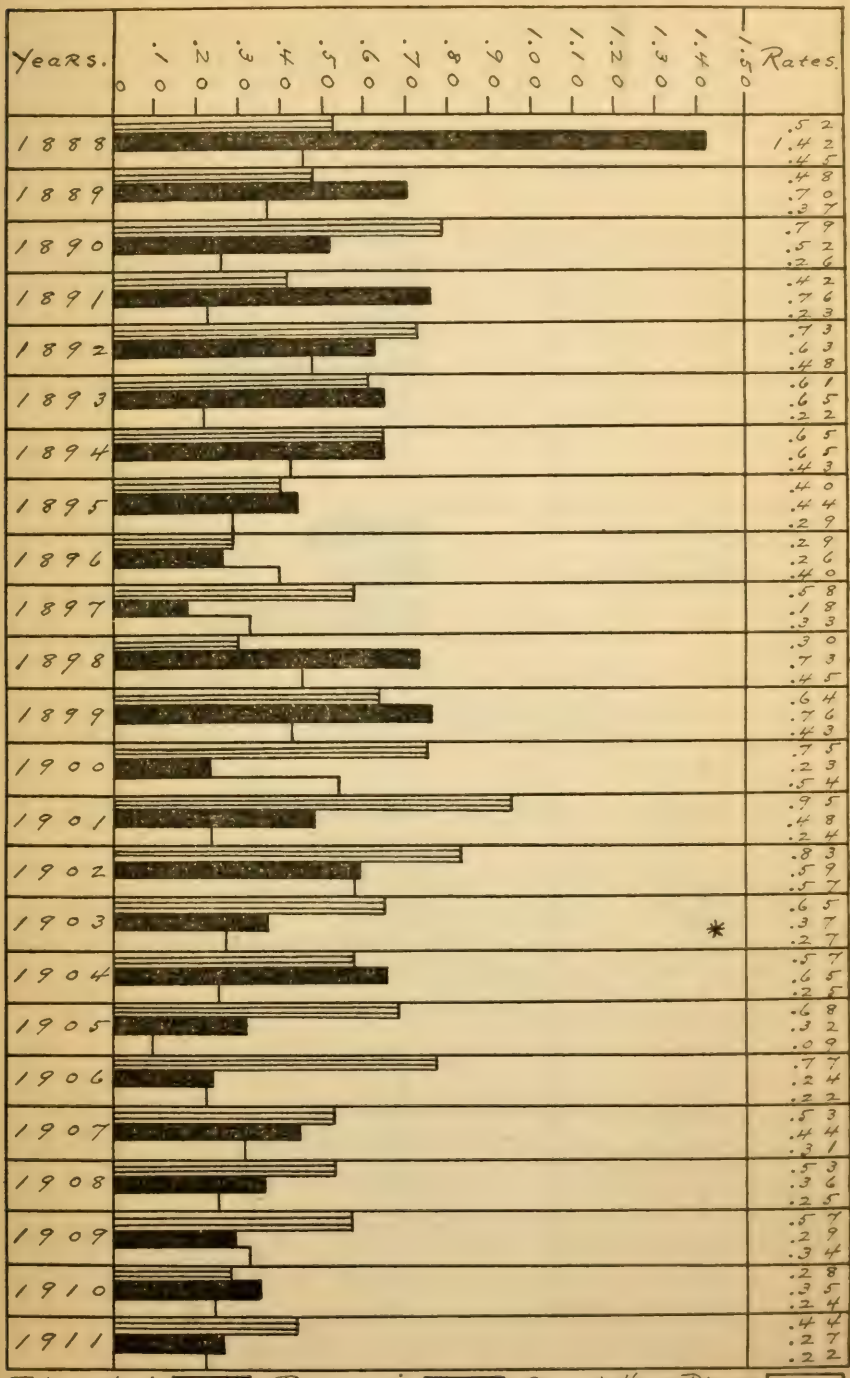


CHART E.—*Showing (for American troops), by countries, the relative admission, death, discharge, and noneffective rates, for disease, year 1911.*

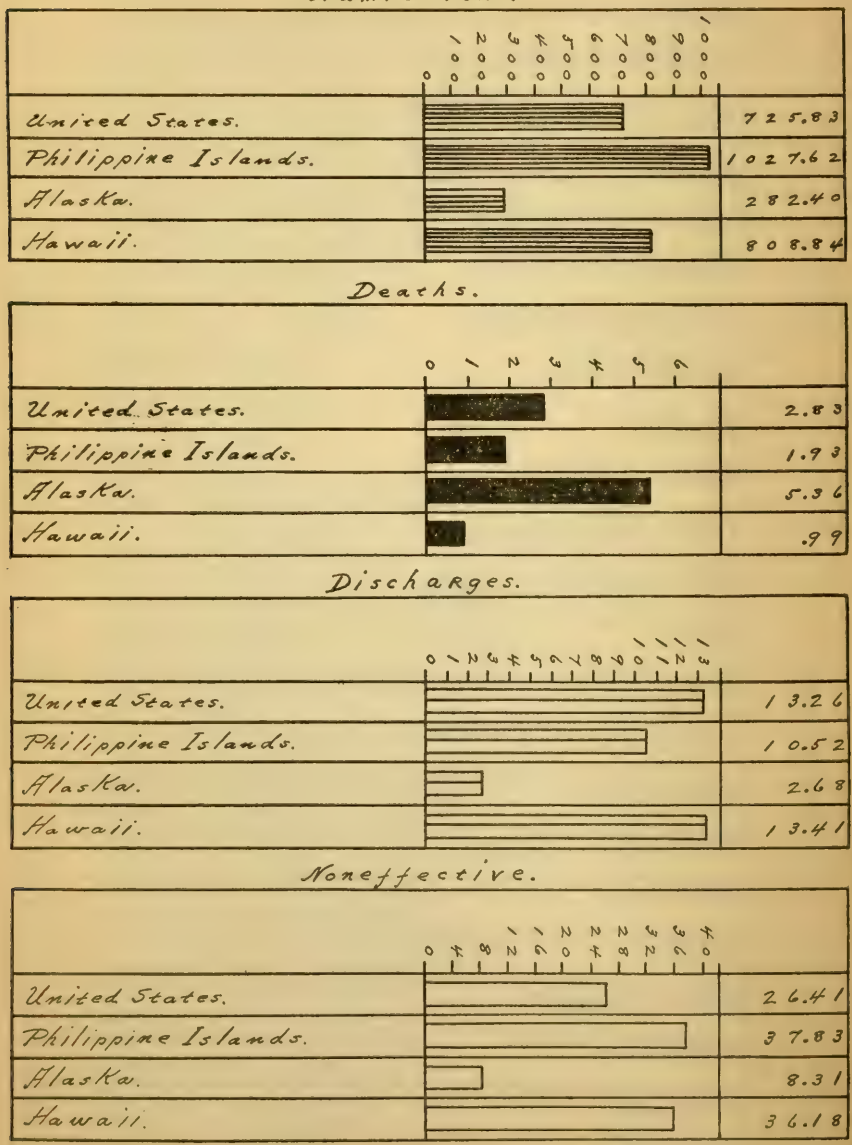
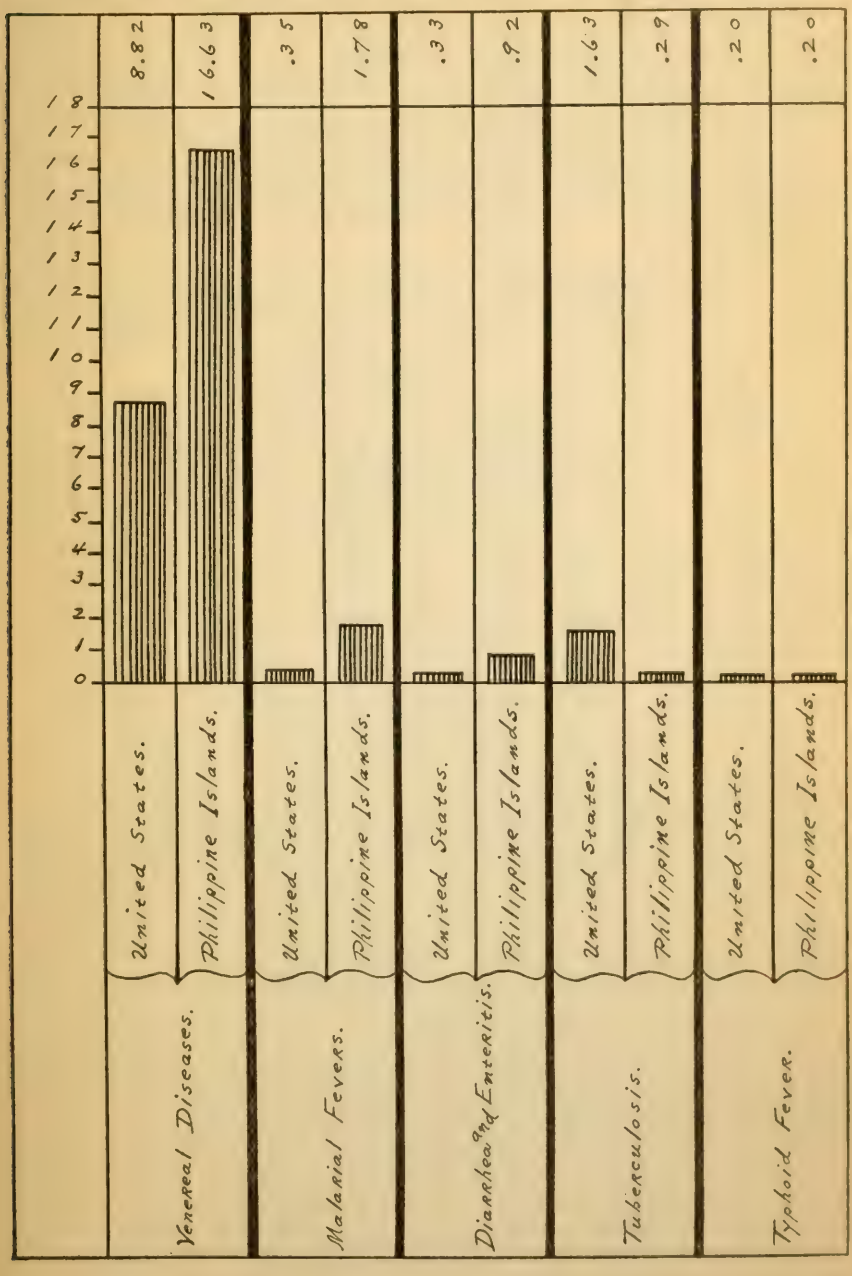


CHART F.—*Showing (for American troops in the United States and the Philippine Islands) the relative noneffective rates for certain special diseases, year 1911.*



INFLUENCE OF ARMS OF SERVICE.

(See International Tables III and VII.)

In these comparisons the enlisted men of the Ordnance Department and Signal Corps are not considered on account of their small number, and the special character of their service.

The admission rate was highest for the Cavalry and lowest for the Hospital Corps, the death rate was highest in the Engineers and lowest in the Coast Artillery.

The following table shows the relative frequency of the occurrence of the more important diseases for the various arms of the service, the figure 1 indicating the highest ratio and 6 the lowest in each case for each arm:

TABLE NO. 7.—*The relative frequency of occurrence of certain important diseases by arms of service, United States Army, year 1911.*

Arms of service.	Most important diseases.											
	Venereal.	Tonsilitis and pharyngitis.	Diarrhea and enteritis.	Malaria.	Bronchitis.	Alcoholism.	Rheumatism, articular.	Dysentery.	Tuberculosis.	Typhoid fever.	Pneumonia.	Injuries.
Cavalry	2	2	1	3	3	4	3	4	6	5	4	1
Field Artillery	1	1	6	2	1	6	5	6	2	....	6	2
Coast Artillery	5	5	5	4	2	2	6	5	3	4	3	4
Infantry	3	4	4	5	4	3	2	2	4	3	2	5
Engineers	4	3	3	1	6	5	1	1	5	1	1	3
Hospital Corps	6	6	2	6	5	1	4	3	1	2	5	6

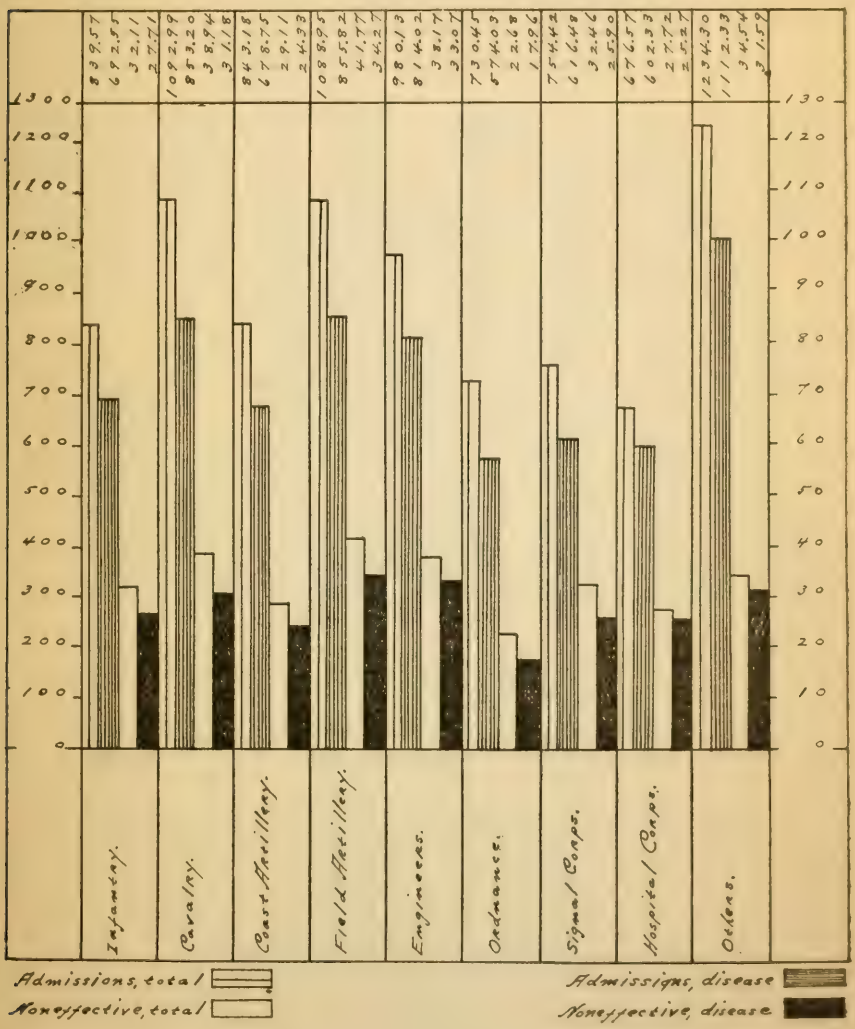
INFLUENCE OF RACE.

(See Tables 65, 68, 69, and 72.)

The tables show that the white troops had the highest noneffective rate and the highest average number of days treatment for each case; the Porto Rican had the highest rate for admissions and for deaths; the colored troops the highest rate for discharge and for total losses. The noneffective rates were white, 33.60; Porto Rican, 29.78; colored, 25.88; Filipino, 19.86. The admission rates were Porto Rican, 1,050; white, 943.85; colored, 747.17; Filipino, 744.78. The discharge rates were colored, 13.99; white, 13.84; Porto Rican, 8.62; Filipino, 4.94. The death rates were Porto Rican, 6.90; colored, 6.66; white, 4.68; Filipino, 4.56. The rates for total losses were colored, 20.65; white, 18.52; Porto Rican, 15.52; Filipino, 9.50. The average number of days' treatment for each case was white, 12.99; colored, 12.64; Porto Rican, 10.35; and Filipino, 9.73.

The admission rate for venereal diseases was for the Porto Ricans 191.38; white, 187.08; colored, 139.91; and Filipino, 58.11 per 1,000. The rate for malarial fevers was for the Filipino 242.12; Porto Rican, 131.03; white, 26.24; and colored, 0.67. Due to the fact that there were no colored troops serving in the Philippines during the year the rate for all tropical diseases, such as malarial fevers, dysenteries, and

CHART G.—*Showing (for the Army), by arms of service, the relative admission and non-effective rates for all causes and for disease only, year 1911.*



dengue, were higher for the white than for the colored troops. The rate for rheumatism for the colored troops was 12.99, for the white 9.38; and that for organic heart diseases was for the colored 3.33 and for the white 1.80 per 1,000. The rate for alcoholism for the white was 22.05; colored, 8.33; Porto Rican, 1.72; and Filipino, 0.76 per 1,000. For insanity the rate was for the Porto Ricans, 3.45 per 1,000; colored, 2.66; white, 1.69; and Filipino, 0.95. For tuberculosis the rate for the colored troops was 5.33 per 1,000; white, 3.67; Filipino, 3.23; and Porto Rican, 1.72.

COMPARISON WITH FOREIGN ARMIES.

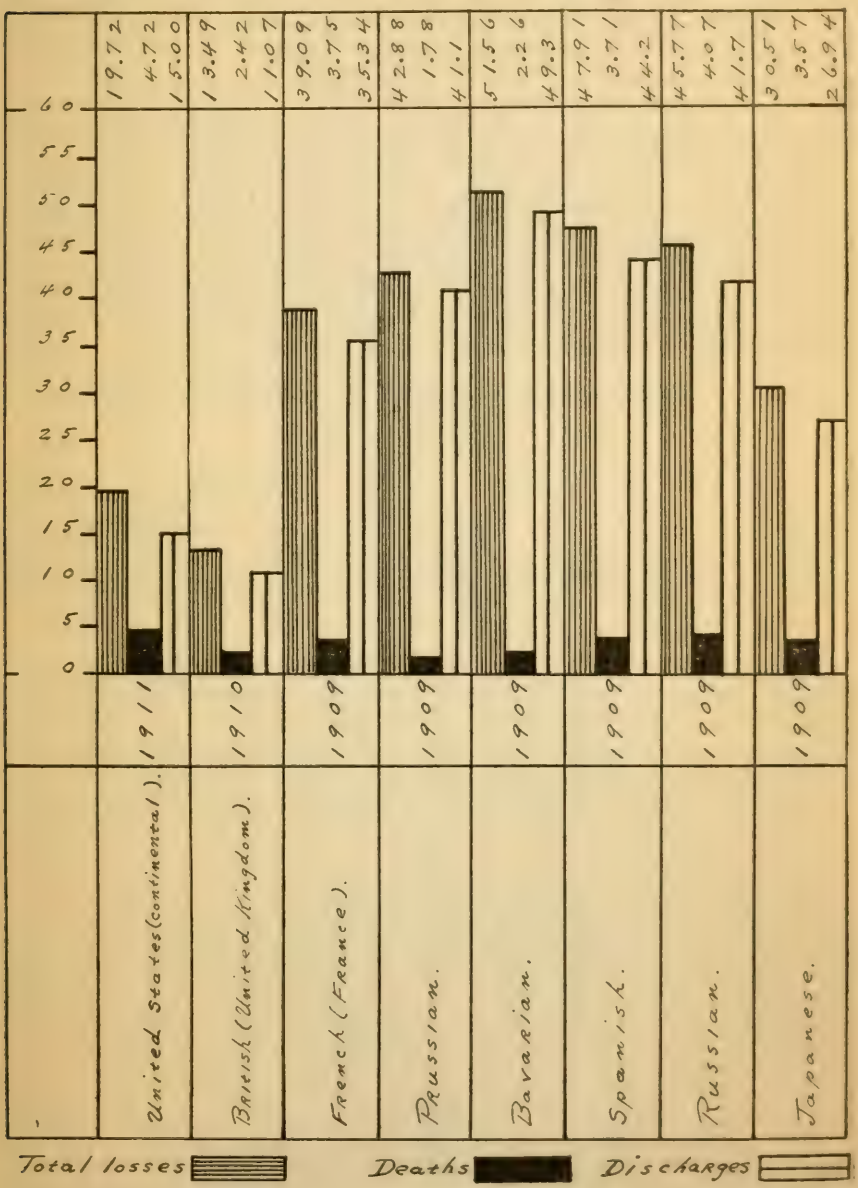
An effort is made in Chart H and Tables Nos. 73 and 74 to make a comparison of the data available in the annexes to the annual reports of the medical departments of the armies of a number of foreign Governments. There are, however, so many factors which are peculiar to each country that an accurate comparison is impossible. For example, in most foreign services many of the minor ailments, which in the United States Army are treated in quarters and recorded with the same accuracy and care as in hospital cases, are not made of record in the medical reports.

Table No. 73 shows that the admission rate for the United States was 887.80 per 1,000, as compared with the French 2,166, Spanish 1,097, Japanese 856.30, Austro-Hungarian 823.2, British 790.78, Prussian 588.9, Bavarian 459.9, and Russian 451.5. The noneffective rate was 31.40 per 1,000 as compared with French 35.85, Spanish 31.83, Japanese 30.97, British 27.28, and Prussian 24.80. The discharge rate was 15 per 1,000 as compared with Bavarian 49.3, Spanish 44.2, Russian 41.7, Prussian 41.1, French 35.34, Japanese 26.94, and English 11.07. The death rate was 4.72 as compared with the Russian 4.07, French 3.75, Spanish 3.71, Japanese 3.57, Austro-Hungarian 2.84, British 2.42, Bavarian 2.26, and Prussian 1.78. The rate for total losses was 19.72 per 1,000, as compared with Bavarian 51.56, Spanish 47.9, Russian 45.8, Prussian 42.88, French 39.09, Japanese 30.51, and English 13.49.

Table No. 74 shows that the admission rates for alcoholism, syphilis, gonorrhea, and chancroid were all much higher for the United States than for any other country. For typhoid fever the admission rate for our Army was 0.80, as compared with the Japanese 5.47, Russian 5.6, Spanish 3.24, French 2.95, British 2.2, Austro-Hungarian 1.3, Prussian 0.35, and Bavarian 0.21. The death rate for typhoid was 0.11 per 1,000 as compared with the Spanish 0.82, Russian 0.78, Japanese 0.55, French 0.47, British 0.28, Austro-Hungarian 0.20, Bavarian 0.06, and Prussian 0.03. For malarial fever the rates for the United States were lower than for the British, Russian, and Japanese, but higher than for the other countries in the table. The rate for dysentery for our Army was higher than that for any other army except the British. For tuberculosis our rate was lower than that for the Spanish, French, and Japanese, but higher than that for the other countries in the table.

It will be noticed that in these tables the figures for the American troops are for the year 1911, for the British and Austro-Hungarian for the year 1910, and for the others included in the table for 1909.

CHART H.—*Showing, for the Army at home, a comparison with foreign armies of the relative total loss, death, and discharge ratios per thousand of mean strength.*



SURGICAL OPERATIONS.

On page 210 will be found Table No. 64 of the principal surgical operations performed by medical officers upon officers and enlisted men; operations upon families of officers and of enlisted men, and other civilians who are entitled to treatment at Army posts are not included. In 4,403 operations there were 27 failures and 24 deaths. The anæsthetic used was ether in 1,899 cases, chloroform in 248, chloroform and ether 74, local 1,606, and none was required in 576 cases. Of major surgical operations there were 324 operations for appendicitis, 218 for inguinal hernia, 30 for empyema, 19 for hepatic abscess, 25 for ischio-rectal abscess, and 288 for hemorrhoids. There were 3 deaths following operation for appendicitis, 2 each for empyema and gunshot wound of abdomen, and 1 for each of the following conditions: sarcoma, left upper maxillary region, intestinal obstruction, intra-abdominal abscess, rupture of small intestines, stab wound of abdomen, sarcoma of rectum, rupture of bladder, laceration of bladder, intracerebral hemorrhage, fracture of vertebra, and 4 deaths following amputations for wounds of the lower extremities.

TABLE NO. 8.—*Influence of disease in the Army, by length of service, age, and arms of service, for the year 1911.*

	Mean strength.	Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.	Ratio per 1,000 of mean strength. Admitted.	Discharged on certificate of disability	Died.	Constantly noneffective.
LENGTH OF SERVICE.									
Under 1 year	13,659	21,270	400	64	707.75	1,557.22	29.18	4.67	51.82
1 to 2 years	8,547	5,621	105	10	211.77	657.66	12.24	1.17	24.78
2 to 3 years	15,338	9,740	113	16	365.10	635.02	7.34	1.04	23.80
3 to 4 years	7,495	5,186	57	10	196.83	691.93	7.57	1.33	26.26
4 to 5 years	4,496	2,288	35	6	90.92	508.90	7.76	1.33	20.23
5 to 10 years	11,768	6,748	113	32	275.07	573.42	9.57	2.71	23.37
10 years and over	11,445	5,122	74	56	206.14	447.53	6.44	4.88	18.01
Total	72,748	55,975	897	194	2,053.58	769.44	12.28	2.66	28.23
AGE.									
19 years and under	2,620	3,711	54	15	119.14	1,416.41	20.53	5.70	45.47
20 to 24 years	28,043	27,929	408	55	967.38	995.93	14.49	1.95	34.50
25 to 29 years	20,204	13,750	212	36	530.60	680.56	10.45	1.78	26.26
30 to 34 years	11,149	5,777	132	39	239.32	518.16	11.80	3.48	21.47
35 to 39 years	5,727	2,599	56	24	107.05	453.82	9.74	4.18	18.69
40 to 44 years	3,052	1,331	17	15	53.03	436.11	5.55	4.90	17.38
45 to 49 years	1,431	588	9	6	24.76	410.90	6.27	4.18	17.30
50 years and over	522	290	9	4	12.30	555.56	17.18	7.63	23.57
Total	72,748	55,975	897	194	2,053.58	769.44	12.28	2.66	28.23
ARMS OF SERVICE.									
Infantry	23,493	16,269	283	61	650.93	692.55	12.01	2.59	27.71
Cavalry	11,969	10,212	109	23	373.16	853.20	9.08	1.92	31.18
Field artillery	4,744	4,060	64	6	162.56	855.82	13.44	1.26	34.27
Coast Artillery	17,289	11,735	200	33	420.60	678.75	11.52	1.90	24.33
Ordnance	716	411	5	4	12.86	574.03	6.95	5.56	17.96
Engineers	1,812	1,475	16	8	59.94	814.02	8.80	4.40	33.07
Signal Corps	1,189	733	13	3	30.79	616.48	10.90	2.51	25.90
Hospital Corps	3,435	2,069	52	11	86.82	602.33	15.08	3.19	25.27
All others	8,101	9,011	155	45	255.92	1,112.33	19.04	5.53	31.59
Total	72,748	55,975	897	194	2,053.58	769.44	12.28	2.66	28.23

The preceding table shows that those having less than one year of service had the highest noneffective admission and discharge rates. These rates are also highest for those 19 years or under. The highest death rates were for those 50 years and over, and for those having 10 years and over of service. The highest noneffective and admission rates were in the Field Artillery, the highest death rate in the Ordnance, and the highest discharge rate in the Hospital Corps.

RECRUITING.

The movement of recruits is shown in Table No. 9. Each recruit before enlistment was given a thorough examination by a medical officer of the Army. There were 50,534 examined as compared with 25,133 for the preceding year. Of each 1,000 examined 90.55 were rejected and 16.33 declined enlistment, as compared with 94.62 and 16.19 for 1910. Of each 1,000 examined by medical officers, 893.12 were accepted, as compared with 889.19 for 1910. Of the number examined and enlisted, 408.52 per 1,000 were reenlistments and 484.60 were original enlistments, as compared with 492.54 and 396.65 for 1910.

TABLE NO. 9.—*Movement of recruits, white and colored, 1911.*

	White.		Colored.		Total.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Examined by medical officers	47,980	1,000.00	2,554	1,00 .00	50,534	1,000.00
Accepted by medical officers	42,786	891.75	2,347	918.95	45,133	893.12
For first enlistment	23,460	488.95	1,029	402.90	24,489	484.60
For all other enlistments	19,326	402.79	1,318	516.05	20,644	408.52
Rejected by medical officers	[1] 4,382	91.33	[1] 194	75.96	[1] 4,576	90.55
Declined to enlist	812	16.92	13	5.09	825	16.33

[1] Of this number 715 (686 white and 29 colored) were rejected for causes not physical.

This table shows only the applicants who had previously passed the scrutiny of the recruiting officers and who were therefore picked men. The number of examinations and of rejections by recruiting officers is not known to this office, but was, of course, much larger. The present recruiting system operates in a highly satisfactory manner and furnishes to the Army recruits of far better quality than when they were examined under the former system of civilian physicians at the places of enlistment.

Table No. 10 shows the nativity of accepted recruits for the year.

TABLE NO. 10.—*Nativities of accepted recruits, American Army, 1911.*

Country of birth.	Accepted recruits, year 1911.		Country of birth.	Accepted recruits, year 1911.	
	Number.	Ratio per 1,000 of total accepted.		Number.	Ratio per 1,000 of total accepted.
United States:			Canada	296	6.56
White	36,556	809.96	Italy	227	5.03
Colored	2,347	52.00	Denmark	149	3.30
Total native born	38,903	861.96	Scotland	98	2.17
			Holland	90	1.99
Germany	1,139	25.24	Switzerland	80	1.77
Ireland	1,022	22.64	France	40	.89
Russia	925	20.49	Others	221	4.90
Austria	709	15.71			
England	476	10.55	Total foreign born	6,230	138.04
Scandinavia	379	8.40			
Hungary	379	8.40	Grand total	45,133	1,000.00

The number of foreign-born recruits is less than last year, being 138.04 per 1,000 for 1911, as compared with 145.56 for 1910 and 140.46 for 1909. The most marked decrease in the proportion of recruits was from Germany, Ireland, and Canada.

The following tables have been carefully compiled and are of interest, as they show the state of physical development of the men admitted to the Army during the year. The ages of all the recruits accepted, including those reenlisted, white and colored, and the proportion at each age per 1,000 are shown in this statement.

TABLE NO. 11.—*Ages of recruits, white and colored, and the proportion at each age per 1,000 accepted.*

Age.	White.		Colored.		Total.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
18 years and under	2,377	55.56	61	25.99	2,438	54.02
19 years	1,753	40.97	57	24.29	1,810	40.10
20 years	893	20.87	38	16.19	931	20.63
21 years	8,337	194.85	302	128.67	8,639	191.41
22 years	4,192	97.98	163	69.45	4,355	96.49
23 years	2,663	62.24	121	51.55	2,784	61.68
24 years	3,664	85.64	175	74.56	3,839	85.06
25 years	2,669	62.38	131	55.82	2,800	62.04
26 years	1,846	43.14	100	42.61	1,946	43.12
27 years	1,820	42.53	115	49.00	1,935	42.87
28 years	1,657	38.73	120	51.12	1,777	39.37
29 years	1,318	30.80	77	32.81	1,395	30.91
30 years	1,289	30.13	104	44.31	1,393	30.86
31 years	1,232	28.79	113	48.15	1,345	29.80
32 years	901	21.06	89	37.92	990	21.94
33 years	882	20.61	92	39.20	974	21.58
34 years	819	19.14	105	44.74	924	20.47
35 years	639	14.93	85	36.21	724	16.04
36 years	547	12.78	41	17.47	588	13.03
37 years	481	11.24	51	21.73	532	11.79
38 years	424	9.91	31	13.21	455	10.08
39 years	332	7.76	22	9.37	354	7.84
40 years and over	2,051	47.94	154	65.61	2,205	48.85
Total	42,786	1,000.00	2,347	1,000.00	45,133	1,000.00

The proportion of accepted recruits under the age of 24 has noticeably increased in comparison with last year, being due undoubtedly to the much larger proportion of original enlistments. The ages of 21 and 22 this year as last year furnished the largest number for any age in the order named.

The series of tables which follow show separately for each race the height of accepted recruits for the year, and the proportion of each height per 1,000; also, in absolute and proportional numbers, the relation of height to age:

TABLE NO. 12.—*Relation of height to age.*

ABSOLUTE NUMBERS—WHITE TROOPS.

Height.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
5 feet 1 inch and under	1	1	1	29	.....	.....	.....	.....	7	39
5 feet 2 inches	1	2	.....	1	.....	1	.....	2	19	26
5 feet 3 inches	22	29	11	83	46	19	32	28	146	416
5 feet 4 inches	192	131	73	458	261	175	215	158	998	2,661
5 feet 5 inches	325	240	102	901	445	300	397	288	1,736	4,734
5 feet 6 inches	407	304	140	1,206	643	397	560	386	2,479	6,522
5 feet 7 inches	475	347	159	1,502	728	467	599	443	2,672	7,392
5 feet 8 inches	390	284	140	1,407	720	448	597	453	2,746	7,185
5 feet 9 inches	280	202	105	1,143	548	348	507	342	2,158	5,633
5 feet 10 inches	154	112	79	774	404	269	366	281	1,568	4,007
5 feet 11 inches	75	56	40	453	201	117	186	146	867	2,141
6 feet	42	35	31	266	122	83	129	97	537	1,342
6 feet 1 inch	8	5	9	69	55	21	49	27	179	422
6 feet 2 inches and over	5	5	3	45	19	18	27	18	126	266
Total	2,377	1,753	893	8,337	4,192	2,663	3,664	2,669	16,238	42,786

PROPORTIONATE NUMBERS—WHITE TROOPS.

5 feet 1 inch and under	0.42	0.57	1.12	3.48	.....	.....	.....	.....	0.43	0.91
5 feet 2 inches	.42	1.14	.....	.12	.....	0.38	.....	0.75	1.17	.61
5 feet 3 inches	9.26	16.54	12.32	9.96	10.97	7.13	8.73	10.49	8.99	9.72
5 feet 4 inches	80.77	74.73	81.75	54.94	62.26	65.71	58.68	59.20	61.46	62.19
5 feet 5 inches	136.73	136.91	114.22	108.07	106.15	112.65	108.35	107.91	106.91	110.64
5 feet 6 inches	171.22	173.42	156.77	144.66	153.39	149.10	152.84	144.62	152.66	152.43
5 feet 7 inches	199.83	197.95	178.05	180.16	173.66	175.37	163.48	165.98	164.55	172.77
5 feet 8 inches	164.07	162.01	156.77	168.77	171.76	168.23	162.94	169.73	169.10	167.93
5 feet 9 inches	117.80	115.23	117.58	137.10	130.73	130.68	138.37	128.14	132.90	131.66
5 feet 10 inches	64.79	63.90	88.47	92.84	96.37	101.01	99.89	105.28	96.56	93.65
5 feet 11 inches	31.55	31.95	44.79	54.34	47.95	43.94	50.76	54.70	53.39	50.04
6 feet	17.67	19.97	34.72	31.91	29.10	31.17	35.21	36.34	33.07	31.37
6 feet 1 inch	3.37	2.85	10.08	8.28	13.12	7.89	13.37	10.12	11.02	9.86
6 feet 2 inches and over	2.10	2.85	3.36	5.40	4.53	6.76	7.37	6.74	7.76	6.22
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

TABLE NO. 13.—*Relation of height to age.*

ABSOLUTE NUMBERS—COLORED TROOPS.

Height.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
5 feet 1 inch and under										
5 feet 2 inches					1				3	4
5 feet 3 inches	3			2			1		14	20
5 feet 4 inches	8	5	5	20	9	9	8	8	69	141
5 feet 5 inches	11	5	4	36	20	18	25	17	144	280
5 feet 6 inches	13	10	7	60	23	17	29	24	198	381
5 feet 7 inches	8	11	7	43	41	25	31	19	240	425
5 feet 8 inches	10	11	7	56	26	19	28	23	225	405
5 feet 9 inches	6	10	2	34	15	17	25	22	154	285
5 feet 10 inches	2	4	3	22	15	7	14	8	128	203
5 feet 11 inches			2	19	6	3	6	6	75	117
6 feet		1		7	4	4	5	3	37	61
6 feet 1 inch			1	2	1	2	3	1	6	16
6 feet 2 inches and over				1	2				6	9
Total	61	57	38	302	163	121	175	131	1,299	2,347

PROPORTIONATE NUMBERS—COLORED TROOPS.

5 feet 1 inch and under										
5 feet 2 inches					6.13				2.31	1.70
5 feet 3 inches	49.18			6.62			5.71		10.78	8.52
5 feet 4 inches	131.15	87.72	131.58	66.23	55.21	74.38	45.71	61.07	53.12	60.08
5 feet 5 inches	180.33	87.72	105.26	119.21	122.70	148.76	142.86	129.77	110.85	119.30
5 feet 6 inches	213.11	175.44	184.21	198.68	141.10	140.50	165.71	183.21	152.42	162.33
5 feet 7 inches	131.15	192.98	184.21	142.38	251.53	206.61	177.14	145.04	184.76	181.08
5 feet 8 inches	163.93	192.98	184.21	185.43	159.51	157.02	160.00	175.57	173.21	172.56
5 feet 9 inches	98.36	175.44	52.63	112.58	92.02	140.50	142.86	167.94	118.55	121.43
5 feet 10 inches	32.79	70.18	78.95	72.85	92.02	57.85	80.00	61.07	98.54	86.49
5 feet 11 inches			52.63	62.91	36.81	24.79	34.29	45.80	57.74	49.85
6 feet		17.54		23.18	24.54	33.06	28.57	22.90	28.48	25.99
6 feet 1 inch			26.32	6.62	6.13	16.53	17.14	7.63	4.62	6.82
6 feet 2 inches and over				3.31	12.27				4.62	3.83
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

It will be noted that 49.07 per cent of the white recruits were 5 feet 8 inches or over and 1.12 per cent were under the minimum height of 5 feet 4 inches, as compared with 49.04 and 0.987 for the previous year.

For colored troops 46.59 were 5 feet 8 inches or over and 1.02 per cent were under the minimum height, as compared with 46.81 and 1.2.

The average height for recruits was 5 feet 7.56 inches.

The following tables show separately for each race the weight of accepted recruits and the proportion of each weight per 1,000; also the relation of weight to age in both absolute and proportional numbers:

TABLE No. 14.—*Relation of weight to age.*

ABSOLUTE NUMBERS—WHITE TROOPS.

Weights.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
119 pounds and under	98	61	23	151	45	27	50	29	267	751
120 to 124 pounds	415	273	99	603	278	162	177	131	670	2,808
125 to 129 pounds	450	317	113	928	479	242	285	216	1,100	4,130
130 to 134 pounds	397	303	172	1,214	564	362	424	311	1,585	5,332
135 to 139 pounds	359	267	139	1,420	581	408	487	353	1,838	5,852
140 to 144 pounds	239	194	109	1,190	599	390	512	374	2,016	5,623
145 to 149 pounds	193	138	78	952	487	317	466	356	1,820	4,807
150 to 154 pounds	92	88	58	711	393	276	426	276	1,652	3,972
155 to 159 pounds	55	55	45	475	333	169	278	210	1,272	2,892
160 to 164 pounds	33	26	25	323	173	124	189	137	1,038	2,068
165 to 169 pounds	14	20	14	183	107	81	141	84	761	1,405
170 to 174 pounds	16	8	10	81	74	45	83	65	609	991
175 to 179 pounds	2	.....	5	50	39	26	52	40	454	668
180 pounds and over	14	3	3	56	40	34	94	87	1,156	1,487
Total	2,377	1,753	893	8,337	4,192	2,663	3,664	2,669	16,238	42,786

PROPORTIONATE NUMBERS—WHITE TROOPS.

119 pounds and under	41.23	34.80	25.76	18.11	10.73	10.14	13.65	10.87	16.44	17.55
120 to 124 pounds	174.59	155.73	110.86	72.33	66.32	60.84	48.31	49.08	41.26	65.63
125 to 129 pounds	189.31	180.83	126.54	111.31	114.27	90.88	77.78	80.93	67.74	96.52
130 to 134 pounds	167.02	172.85	192.62	145.61	134.54	135.94	115.72	116.52	97.61	124.62
135 to 139 pounds	151.02	152.31	155.66	170.32	138.60	153.22	132.91	132.26	113.19	136.77
140 to 144 pounds	100.55	110.66	122.06	142.74	142.89	146.45	139.74	140.13	124.15	131.42
145 to 149 pounds	81.19	78.72	87.35	114.19	116.17	119.04	127.18	133.38	112.08	112.35
150 to 154 pounds	38.70	50.26	64.95	85.28	93.75	103.64	116.27	103.41	101.74	92.83
155 to 159 pounds	23.14	31.38	50.40	56.97	79.44	63.46	75.87	78.68	78.33	67.59
160 to 164 pounds	13.88	14.83	28.00	38.74	41.27	46.56	51.58	51.32	63.92	48.33
165 to 169 pounds	5.89	11.41	15.68	21.95	25.52	30.42	38.48	31.47	46.87	32.84
170 to 174 pounds	6.73	4.56	11.20	9.72	17.65	16.90	22.65	24.36	37.50	23.16
175 to 179 pounds	.84	.....	5.60	6.00	9.30	9.76	14.19	14.99	27.96	15.61
180 pounds and over	5.89	1.71	3.36	6.72	9.54	12.77	25.65	32.60	71.19	34.76
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

TABLE No. 15.—*Relation of weight to age.*

ABSOLUTE NUMBERS—COLORED TROOPS.

Weights.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
119 pounds and under	3	2	.....	2	.....	1	1	.....	7	16
120 to 124 pounds	10	5	2	12	3	5	3	3	22	65
125 to 129 pounds	10	6	2	20	13	7	9	9	56	132
130 to 134 pounds	7	12	8	44	24	13	16	16	103	243
135 to 139 pounds	8	9	7	39	23	12	18	15	105	236
140 to 144 pounds	13	8	3	53	26	22	19	19	155	318
145 to 149 pounds	7	4	6	36	23	13	39	21	128	277
150 to 154 pounds	1	6	2	36	14	17	14	18	157	265
155 to 159 pounds	.....	2	1	23	10	9	20	10	139	214
160 to 164 pounds	1	1	4	9	12	11	12	7	122	179
165 to 169 pounds	1	.....	.....	12	8	2	10	7	90	130
170 to 174 pounds	.....	.....	1	9	1	1	9	5	64	90
175 to 179 pounds	.....	.....	2	4	2	3	2	.....	47	60
180 pounds and over	.....	2	.....	3	4	5	3	1	104	122
Total	61	57	38	302	163	121	175	131	1,299	2,347

PROPORTIONATE NUMBERS—COLORED TROOPS.

119 pounds and under	49.18	35.09	.....	6.62	.....	8.26	5.71	.....	5.39	6.82
120 to 124 pounds	163.93	87.72	52.63	39.74	18.40	41.32	17.14	22.90	16.94	27.69
125 to 129 pounds	163.93	105.26	52.63	66.23	79.75	57.85	51.43	68.70	43.11	56.24
130 to 134 pounds	114.75	210.52	210.53	145.70	147.24	107.43	91.43	122.14	79.29	103.54
135 to 139 pounds	131.15	157.89	184.21	129.14	141.10	99.17	102.86	114.50	80.83	100.55
140 to 144 pounds	213.11	140.35	78.95	175.50	159.51	181.82	108.57	145.04	119.32	135.49
145 to 149 pounds	114.75	70.18	157.89	119.21	141.10	107.43	222.86	160.31	98.54	118.02
150 to 154 pounds	16.39	105.26	52.63	119.21	85.89	140.50	80.00	137.40	120.86	112.91
155 to 159 pounds	.....	35.09	26.32	76.16	61.35	74.38	114.29	76.34	107.01	91.18
160 to 164 pounds	16.39	17.54	105.26	29.80	73.62	90.91	68.57	53.44	93.92	76.27
165 to 169 pounds	16.39	.....	.....	39.74	49.08	16.53	57.14	53.44	69.28	55.39
170 to 174 pounds	.....	.....	26.32	29.80	6.13	8.26	51.43	38.17	49.27	38.35
175 to 179 pounds	.....	.....	52.63	13.25	12.27	24.79	11.43	.....	36.18	25.56
180 pounds and over	.....	35.08	.....	9.93	24.54	41.32	17.14	7.63	80.06	51.98
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

The average weight of recruits was 145.31 pounds; of the white troops 55.89 per cent weighed 140 pounds or over, and 1.8 per cent weighed less than the minimum, 120 pounds, as compared with 58.07 and 1.61 for 1910. Of the colored troops, 70.48 per cent weighed 140 pounds or over, while 0.68 per cent weighed less than the minimum, 120 pounds, compared with 73.6 and 0.48 for 1910.

The next tables show separately for each race the chest measurement of accepted recruits, and the proportion of each measurement per 1,000; also the chest measurement in relation to age in both absolute and proportional numbers.

TABLE No. 16.—*Relation of chest measurement to age.*

ABSOLUTE NUMBERS—WHITE TROOPS.

Chest measurement.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
30 inches and under.	137	84	28	182	81	36	56	28	198	830
31 inches	393	294	120	734	275	135	204	134	776	3,065
32 inches	822	549	234	2,059	871	504	598	436	2,107	8,180
33 inches	548	428	219	2,157	1,018	655	826	641	3,055	9,547
34 inches	302	243	173	1,690	940	601	827	588	3,257	8,021
35 inches	102	108	72	918	567	390	595	401	2,642	5,795
36 inches	52	37	32	412	287	216	332	254	1,869	3,491
37 inches	16	10	11	133	96	81	130	110	1,080	1,667
38 inches	2	.....	2	35	41	29	66	44	619	838
39 inches and over...	3	.....	2	17	16	16	30	33	635	752
Total.....	2,377	1,753	893	8,337	4,192	2,663	3,664	2,669	16,238	42,786

PROPORTIONATE NUMBERS—WHITE TROOPS.

30 inches and under.	57.64	47.92	31.36	21.83	19.32	13.52	15.28	10.49	12.19	19.40
31 inches	165.33	167.72	134.38	88.04	65.60	50.70	55.68	50.21	47.79	71.64
32 inches	345.81	313.18	262.04	246.97	207.76	189.26	163.20	163.36	129.76	191.18
33 inches	230.54	244.15	245.24	258.73	242.84	245.96	225.43	240.16	188.14	223.13
34 inches	127.05	138.62	193.73	202.71	224.24	225.69	225.71	220.31	200.58	201.49
35 inches	42.91	61.61	80.63	110.10	135.26	146.46	162.39	150.24	162.70	135.44
36 inches	21.88	21.11	35.84	49.42	68.46	81.12	90.61	95.17	115.10	81.59
37 inches	6.73	5.70	12.32	15.95	22.90	30.42	35.48	41.22	66.51	38.96
38 inches	.84	.....	2.24	4.20	9.78	10.89	18.01	16.49	38.12	19.59
39 inches and over...	1.26	.....	2.24	2.04	3.82	6.01	8.19	12.36	39.11	17.58
Total.....	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

TABLE No. 17.—*Relation of chest measurement to age.*

ABSOLUTE NUMBERS—COLORED TROOPS.

Chest measurement.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
30 inches and under.	5	3	.....	10	2	2	3	2	17	44
31 inches	16	9	3	26	14	10	11	8	60	157
32 inches	20	17	10	62	36	28	34	24	168	399
33 inches	17	14	10	84	42	18	50	35	252	522
34 inches	3	8	7	62	31	23	35	23	272	464
35 inches	.....	4	5	33	20	25	19	27	210	343
36 inches	.....	1	1	18	12	9	14	9	159	223
37 inches	.....	1	2	4	3	4	6	1	80	101
38 inches	.....	.....	.....	1	2	2	2	2	47	56
39 inches and over...	.....	.....	.....	2	1	.....	1	.....	34	38
Total.....	61	57	38	302	163	121	175	131	1,299	2,347

PROPORTIONATE NUMBERS—COLORED TROOPS.

30 inches and under.	81.97	52.63	.....	33.11	12.27	16.53	17.14	15.27	13.09	18.75
31 inches	262.30	157.89	78.95	86.09	85.89	82.64	62.86	61.07	46.19	66.89
32 inches	327.87	298.25	263.16	205.30	220.86	231.40	194.29	183.21	129.33	170.01
33 inches	278.69	245.61	263.16	278.15	257.67	148.76	285.71	267.18	194.00	222.41
34 inches	49.18	140.35	184.21	205.30	190.18	190.08	200.00	175.57	209.39	197.70
35 inches	.....	70.18	131.58	109.27	122.70	206.61	108.57	206.11	161.66	146.14
36 inches	.....	17.54	26.32	59.60	73.62	74.38	80.00	68.70	122.40	95.01
37 inches	.....	17.54	52.63	13.25	18.40	33.06	34.29	7.63	61.59	43.04
38 inches	.....	.....	.....	3.31	12.27	16.53	11.43	15.27	36.18	23.86
39 inches and over...	.....	.....	.....	6.62	6.13	.....	5.71	.....	26.17	16.19
Total.....	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

The chest measurement of 49.47 per cent of the white recruits was 34 inches and over and 1.94 per cent were 30 inches and under, as compared with 47.15 and 2.87 per cent, respectively, for the preceding year. The chest measurements for colored recruits show 52.19 per cent 34 inches or over and 1.88 per cent 30 inches and under, as compared with 52.63 and 1.67 for 1910.

The following table shows the causes of rejection among white and colored troops examined for enlistment during the year 1911, with the ratios per 1,000 rejected:

TABLE No. 18.—*Causes of rejection by medical officers of the Army of candidates examined for enlistment, year 1911.*

Causes of rejection.	Total.		White.						Colored.	
			Native born.		Foreign born.		Total.			
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Venereal diseases	511	111.67	418	110.47	50	83.61	468	106.80	43	221.65
Heart disease	448	97.90	379	100.16	42	70.23	421	96.08	27	139.18
Diseases of the ear, including defects of hearing	392	85.66	335	88.53	51	85.28	386	88.09	6	30.93
Diseases of the eye, including defects of vision	343	74.96	288	76.11	44	73.58	332	75.76	11	56.70
Flat feet	252	55.07	205	54.18	39	65.22	244	55.68	8	41.24
Underweight	160	34.97	141	37.26	13	21.74	154	35.15	6	30.93
Defects of development, except as shown in detail	140	30.60	123	32.51	17	28.43	140	31.95	.....	.....
Alcoholism	139	30.38	124	32.77	13	21.74	137	31.27	2	10.31
Diseases of the respiratory system	123	26.88	110	29.07	10	16.72	120	27.39	3	15.46
Tuberculosis	118	25.79	109	28.81	6	10.03	115	26.25	3	15.46
Hernia	114	24.91	100	26.43	8	13.38	108	24.65	6	30.93
Defective teeth	103	22.51	79	20.88	13	21.74	92	20.99	11	56.70
Diseases of the genito-urinary system, nonvenereal	103	22.51	91	24.05	6	10.03	97	22.14	6	30.93
Chest development, insufficient	99	21.64	88	23.26	7	11.71	95	21.68	4	20.62
Diseases of the skin	90	19.67	79	20.88	8	13.38	87	19.86	3	15.46
Diseases of the organs of locomotion, except spinal curvature	84	18.36	75	19.82	8	13.38	83	18.94	1	5.15
Diseases of the nervous system, except as shown in detail	82	17.92	72	19.03	7	11.71	79	18.03	3	15.46
General diseases	70	15.30	64	16.91	5	8.36	69	15.75	1	5.15
Weakness of mind	64	13.99	49	12.95	11	18.39	60	13.69	4	20.62
Curvature of the spine	54	11.80	44	11.63	4	6.69	48	10.95	6	30.93
Varicose veins	53	11.58	40	10.57	10	16.72	50	11.41	3	15.46
Hemorrhoids	36	7.87	30	7.93	5	8.36	35	7.99	1	5.15
Diseases of the digestive system, except as shown in detail	29	6.34	24	6.34	3	5.02	27	6.16	2	10.31
Varicocele	27	5.90	26	6.87	.....	.....	26	5.93	1	5.15
Overweight and obesity	19	4.15	17	4.49	2	3.34	19	4.34	.....	.....
Underheight	13	2.84	11	2.91	2	3.34	13	2.97	.....	.....
Diseases of the circulatory system, except as shown in detail	9	1.97	7	1.85	2	3.34	9	2.05	.....	.....
Physical debility	5	1.09	5	1.32	.....	.....	5	1.14	.....	.....
Overheight	2	.44	2	.53	.....	.....	2	.46	.....	.....
Injuries	179	39.12	157	41.49	18	30.10	175	39.94	4	20.62
Rejected for causes physical and mental	3,861	843.75	3,292	869.98	404	675.59	3,696	843.45	165	850.52
Rejected for causes not physical or mental	715	156.25	492	130.02	194	324.41	686	156.55	29	149.48
Total rejected	4,576	1,000.00	3,784	1,000.00	598	1,000.00	4,382	1,000.00	194	1,000.00

Venereal diseases caused the largest proportion of rejection, being 111.67 per 1,000, as compared with 113.96 for 1910. Heart diseases were second, with diseases of the ear, eye, and flat feet, in the order given. Venereal diseases, though first, were lower in 1911 than in 1910. In the colored race the ratio for venereal diseases was considerably greater than for same cause or any cause in the white race. It was, however, lower than for the previous year, being 221.65, as as compared with 228.92.

Table No. 19 shows the principal occupations of 24,489 recruits enlisted during the year:

TABLE No. 19.—*Principal occupations of recruits, first enlistment, year 1911*

Occupation.	Number in each case.			Occupation.	Number in each case		
	Total.	White.	Colored.		Total.	White.	Colored
Laborers	8,565	8,011	554	Mill workers	75	75	.....
Farmers	3,334	3,287	47	Teachers	72	71	1
Drivers and stablemen	1,315	1,262	53	Linemen	50	50	.....
Clerks	1,250	1,245	5	Nurses	49	49	.....
Machinists	620	614	6	Glass workers	43	42	1
Carpenters	537	535	2	Conductors	42	42	.....
Miners	536	526	10	Druggists	41	41	.....
Firemen	516	507	9	Lumbermen	41	41	.....
Cooks	490	415	75	Hatters	36	36	.....
Painters	484	475	9	Paper workers	36	36	.....
Railroad hands	350	344	6	Stenographers	36	36	.....
Electricians	328	328	.....	Motormen	35	35	.....
Plumbers	303	301	2	Jewelers	29	29	.....
Barbers	273	259	14	Plasterers	29	29	.....
Musicians	244	235	9	Leather workers	24	24	.....
Metal workers	232	227	5	Civil engineers	23	23	.....
Printers	216	216	.....	Gardeners	23	23	.....
Salesmen	212	211	1	Merchants	21	21	.....
Tailors	213	204	9	Draftsmen	17	17	.....
Bakers	209	203	6	Upholsterers	17	17	.....
Blacksmiths	189	183	6	Florists	16	15	1
Waiters	188	144	44	Cigar makers	16	16	.....
Butchers	183	183	.....	Bartenders	14	14	.....
Engineers	159	159	.....	Laundrymen	14	14	.....
Shoemakers	144	144	.....	Lawyers	13	13	.....
Porters	136	48	88	Cranemen	13	13	.....
Sailors	134	134	.....	Coopers	10	10	.....
Telegraphers	131	130	1	Undertakers	10	10	.....
Molders	131	124	7	Cement workers	9	9	.....
Chauffeurs	131	121	10	Chemists	8	8	.....
Mechanics	122	119	3	Dyers	8	8	.....
Bookkeepers	113	112	1	Actors	6	6	.....
Brick and stone masons	113	110	3	Dentists	5	5	.....
Weavers	110	110	.....	Rubber workers	5	5	.....
Boiler makers	107	107	.....	Miscellaneous	1,113	1,076	37
Students	93	89	4				
Tinners	79	79	.....	Total	24,489	23,460	1,029

DISCHARGES FOR DISABILITY FOR THE ARMY.

Soldiers stationed outside the territorial limits of the United States are now brought to San Francisco for discharge, except those belonging to the Porto Rican regiment and the Philippine Scouts. They are, however, credited in the tabulated reports to the country in which the soldiers were serving when they became disabled if their commands were there at date of discharge.

The number of discharges for disability continues to decrease, being for the Army, for all causes, 13.85 per 1,000 for the year 1911, as compared with 14.02 for 1910. This decrease has continued since 1906, when the discharge rate was 26 per 1,000 (see Chart I). The present

system requires that all soldiers certified by medical officers to be permanently incapacitated for the military service shall be examined and observed by a board of three medical officers at a recruit depot or general hospital before being discharged. The reports of these boards are sent to the War Department and discharges for disability are now made only by authority of the Secretary of War. Of the soldiers so certified for discharge during 1911, 39 were returned to duty by these boards.

UNITED STATES (CONTINENTAL) EXCLUSIVE OF ALASKA.

The average mean strength of the troops serving in the United States was 55,240 (S. G. O.), of which 52,307 were white and 2,933 colored. The noneffective rate, the true measure of the effect of sickness on the military efficiency, for this year shows a decided improvement over last year. The rate was 31.40 per 1,000 for 1911 as compared with 33.95. That for disease was 26.41, and for injury 4.99 in 1911 as compared with 28.44, and 5.51 for 1910. The number constantly sick from disease and external causes in 1911 was 1,734.42, and in 1910 was 1,890.51. In other words, in 1911 there were 166.09 more men constantly fit for duty than in 1910. The noneffective rate for 1909, 1908, 1907, and 1906 was, respectively, 39.70, 41.19, 45.22, and 46.92.

The total admission rate for the year also shows an improvement, being 887.80 per 1,000 as compared with 899.25 for 1910, 1,024.37 for 1909, 1,148.59 for 1908, 1,172.04 for 1907, and 1,179.93 for 1906. The admission rate for disease was, however, slightly higher, while that for external causes lower in 1911 than in 1910, being 725.83 and 161.97 as compared with 715.54 and 183.71, respectively. The discharge rate for 1911 was 15 as compared with 15.28 for 1910, 18.87 for 1909, 21.35 for 1908, 25.36 for 1907, and 32.29 for 1906.

The death rate was 4.72 as compared with 4.42 for 1910, 4.84 for 1909, 5.35 for 1908, 5.63 for 1907, and 5.28 for 1906. The total number of deaths in 1911 was 262; of this number 157 were due to disease and 105 to external causes. Deaths, as well as discharges, which occurred in the United States among those who have been invalided home from their commands in foreign service, have been charged to the country where such commands are stationed.

The white troops had higher rates than the colored for noneffective admissions and discharges, being 31.68, 895.02, and 15.04 as compared with 26.38, 758.95, and 14.32 per 1,000. The death rate for colored troops was, however, higher, being 6.82 as compared with 4.60. These comparisons were also true for 1910.

The highest noneffective rate for disease was that for venereal disease, being 8.82. In 1910 it was 10.14. The second highest was tuberculosis (all kinds), 1.63. This rate was 1.87 in 1910. The highest admission rate was also for venereal diseases, being 163.85; the second highest for bronchitis 34.40. The rate in 1910 for venereal disease was 155.51. The highest discharge rate was for tuberculosis; the highest death rate for disease was also for tuberculosis.

DISCHARGES FOR DISABILITY, UNITED STATES.

The disability discharge rate for the United States for 1911 was 15 per 1,000 as compared with 15.28 for 1910, 18.87 for 1909, 21.35 for 1908, and 25.36 for 1907. These figures show a very material reduction. The cause for this improvement during the last few years is believed to have been due to a large extent to General Order 174, War Department, 1909, which requires that soldiers certified by medical officers to be permanently incapacitated for the military service shall be examined and observed by a board of three medical officers at a recruit depot or a general hospital before discharge.

The following table shows the result of the work of the boards at the recruiting depots:

TABLE No. 20.—*Results at recruit depots of examination by Boards, of soldiers recommended for discharge.*

	Recruit depots.					
	Columbus Barracks, Ohio.	Jefferson Barracks, Mo.	Fort Logan, Colo.	Fort McDowell, Cal.	Fort Slocum, N. Y.	Total.
Number received	22	91	73	145	119	450
Number discharged for disability	17	64	67	121	79	348
Incurred "In line of duty"	9	22	28	48	44	151
Incurred "Not in line of duty"	8	42	39	73	35	197
Number in which line of duty was changed from "Yes" to "No"	2	10	2	1	5	20
Number in which line of duty was changed from "No" to "Yes"					1	1
Number returned to duty	1	9	6	6	17	39
Number otherwise disposed of	1	3		7	10	[1] 21
Number remaining at end of year	3	15		11	13	42

[1] Died, 2; deserted, 1; transferred elsewhere, 18.

The principal causes of discharge, with the percentage of discharges, were as follows: (1) Tuberculosis, 21.47; (2) insanity, 10.33; (3) venereal diseases, 9.92; (4) flat feet, 8.02; (5) heart disease, 5.03.

The following table shows the causes of discharges for disability for the year 1911, United States (continental):

CHART I.—*Showing (for the United States proper) the ratios per thousand of mean strength for discharges for disability, all causes, for ten years, 1902–1911.*

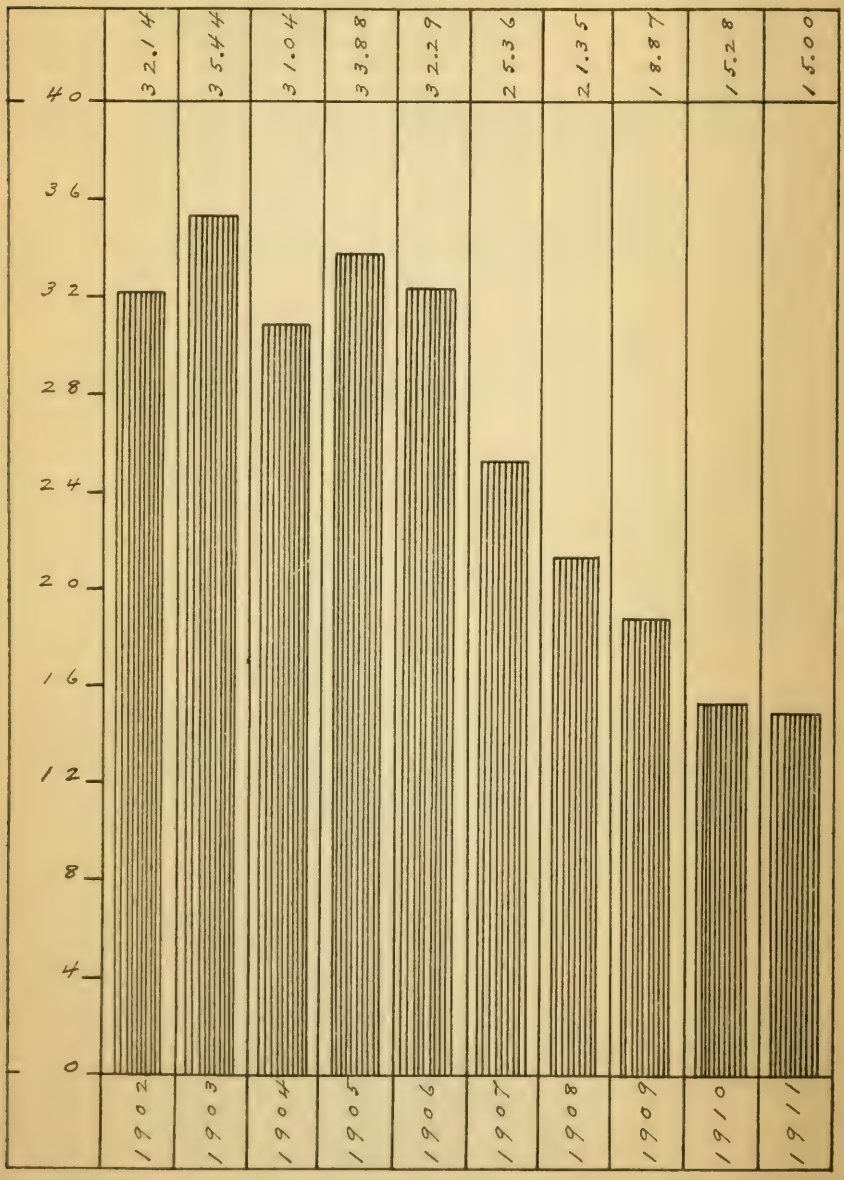


TABLE No. 21.—*Discharges for disability, year 1911, United States, continental (excluding Alaska).*

Causes of discharge.	Number discharged.	Percentage of total discharges for diseases or external causes.	Discharges for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty.
General diseases	280	38.04	166	34	56	2	22
Tuberculosis (of the lungs, 143; of other organs, 15)	158	21.47	136	14	.....	1	7
Syphilis (primary, 1; secondary, 10; tertiary, 15; hereditary, 3)	29	3.94	1	7	16	.....	5
Gonorrhea (rheumatism, 32; chronic gonorrhea, 9; of eye, 1; other forms, 2)	44	5.98	.....	4	32	.....	8
Rheumatism, articular, subacute, and chronic	16	2.17	14	1	1	.....	.....
Alcoholism, chronic	10	1.36	.....	3	6	.....	1
Diabetes	6	.82	5	1	.....	.....	.....
Exophthalmic goiter	5	.68	2	3	.....	.....	.....
Dysentery, amœbic	4	.54	3	.....	.....	1	.....
Tumor, malignant	2	.27	2	.....	.....	.....	.....
Drug habit	2	.27	.....	1	1	.....	.....
Typhoid fever, effects of	1	.14	1	.....	.....	.....	.....
Diphtheria, effects of	1	.14	1	.....	.....	.....	.....
Leukemia	1	.14	1	.....	.....	.....	.....
Anaemia, pernicious	1	.14	.....	.....	.....	.....	1
Diseases of the nervous system	146	19.84	56	57	16	.....	17
Insanity	76	10.33	24	33	12	.....	7
Epilepsy	20	2.72	3	10	2	.....	5
Neuritis	7	.95	5	2	.....	.....	.....
Neurasthenia	7	.95	5	2	.....	.....	.....
General paralysis of the insane	6	.82	5	.....	1	.....	.....
Paralysis, local	5	.68	4	.....	.....	.....	1
Spinal cord, diseases of	5	.68	4	1	.....	.....	.....
Sciatica, subacute, and chronic	3	.41	3	.....	.....	.....	.....
Chorea, chronic	1	.14	.....	1	.....	.....	.....
Hyperchondriasis, chronic	1	.14	.....	1	.....	.....	.....
Other diseases of the nervous system (hysteria, 9; psychopathic constitution, 2; night fear, 1; masturbation, 1; musicians' palsy, 1; unstable nervous system, 1)	15	2.04	3	7	1	.....	4
Congenital malformation and arrested development	94	12.77	.....	73	.....	.....	21
Flat feet	59	8.02	.....	50	.....	.....	9
Defective mentality	28	3.80	.....	16	.....	.....	12
Defective physique	3	.41	.....	3	.....	.....	.....
Malformation of leg	3	.41	.....	3	.....	.....	.....
Malformation of foot	1	.14	.....	1	.....	.....	.....
Diseases of the circulatory system	51	6.93	25	10	1	5	10
Organic heart disease	37	5.03	17	6	.....	5	9
Functional disease of heart	5	.68	2	3	.....	.....	.....
Aneurism	3	.41	3	.....	.....	.....	.....
Varicose veins	2	.27	.....	1	1	.....	.....
Pericarditis, chronic adhesive	1	.14	1	.....	.....	.....	.....
Arteriosclerosis	1	.14	1	.....	.....	.....	.....
Varicocele	1	.14	.....	.....	.....	.....	1
Phlebitis	1	.14	1	.....	.....	.....	.....
Diseases of the digestive system	46	6.25	24	6	2	.....	14
Hernia (inguinal, 20; ventral, 1)	21	2.85	4	3	2	.....	12
Hepatic abscess	6	.82	6	.....	.....	.....	.....
Appendicitis	5	.68	3	1	.....	.....	1
Gastritis, chronic	4	.54	3	1	.....	.....	.....
Gastric ulcer, chronic	2	.27	2	.....	.....	.....	.....
Cholecystitis	1	.14	.....	1	.....	.....	.....
Pyorrhea, alveolaris	1	.14	1	.....	.....	.....	.....
Diarrhea, chronic	1	.14	1	.....	.....	.....	.....
Other diseases of the intestines (duodenal ulcer, 1; prolapsis of rectum, 1; intestinal paresis, 1)	3	.41	2	.....	.....	.....	1
Other diseases of the digestive system (subphrenic abscess, 1; tumor of the pancreas, 1)	2	.27	2	.....	.....	.....	.....
Diseases of the organs of special sense	34	4.62	14	11	1	1	7
Otitis media, chronic catarrhal	16	2.17	7	6	.....	1	2
Hyperopic astigmatism	4	.54	.....	2	.....	.....	2
Trachoma	3	.41	.....	1	.....	.....	2
Deafness	3	.41	2	1	.....	.....	.....

TABLE No. 21.—*Discharges for disability, year 1911, United States, continental (excluding Alaska)*—Continued.

Causes of discharge.	Number discharged.	Percentage of total discharges for diseases or external causes.	Discharges for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty.
Diseases of the organs of special sense—Continued.							
Conjunctivitis, chronic follicular	1	0.14			1		
Sclerotitis, chronic	1	.14	1				
Retino-choroiditis	1	.14	1				
Optic neuritis	1	.14	1				
Other diseases of the eye (exophorio, 1; hemorrhage into vitreous, 1; strabismus, 1; atrophy of optic nerve, 1)	4	.54	2	1			1
Diseases of the genito-urinary system	33	4.48	6	17			10
Enuresis, nocturnal, chronic	22	2.99		13			9
Chronic Bright's disease	6	.82	4	2			
Cystitis, chronic	2	.27	1	1			
Nephritis, acute	1	.14	1				
Renal calculi	1	.14					1
Vesical calculi	1	.14		1			
Diseases of the organs of locomotion	26	3.53	14	8	1		3
Synovitis, chronic	5	.68	3	1			1
Curvature of spine	3	.41		2			1
Muscular rheumatism and myalgia	3	.41	3				
Arthritis	2	.27	2				
Periostitis	2	.27	1		1		
Osteomyelitis, chronic	1	.14	1				
Necrosis, ankle	1	.14	1				
Exostosis, humerus	1	.14					1
Bursitis	1	.14		1			
Other diseases of the joints (hammer toe, 2; halluxvalgus, 2; ankylosis, 1; metatarsalgia, 1; dislocation of cartilage, 1)	7	.95	3	4			
Diseases of respiratory system	16	2.17	5	7		2	2
Pleurisy, chronic	5	.68	3			2	
Asthma	5	.68	1	3			1
Bronchitis, chronic	3	.41		2			1
Pulmonary, emphysema	2	.27	1	1			
Goiter	1	.14		1			
Diseases of the skin and cellular tissue	9	1.22	4	2	1		2
Palmer abscess	2	.27	1		1		
Dermatitis, herpetiformis	2	.27	1	1			
Gangrene	1	.14	1				
Painful callous, foot	1	.14	1				
Eczema, chronic	1	.14					1
Other diseases of the skin and cellular tissue (bromohyperidrosis, 1; psoriasis, 1)	2	.27		1			1
Senile debility	1	.14	1				
Total	736	100.00	315	225	78	10	108
EXTERNAL CAUSES.							
Fractures	34	35.05	26		8		
Gunshot wounds	11	11.34	6		4	1	
Crushing	7	7.22	4		2	1	
Contusions	4	4.12	4				
Incised wounds	4	4.12	1		1	1	1
Dislocations	3	3.09	1	1	1		
Sprains	3	3.09	3				
Lacerated wounds	3	3.09	2		1		
Contused wounds	2	2.06	1		1		
Muscular strains	1	1.03	1				
Punctured wounds	1	1.03	1				
Results of injurious received before enlistment	24	24.74		24			
Total	97	100.00	50	25	18	3	1
Total diseases	736	88.36	315	225	78	10	108
Total external causes	97	11.64	50	25	18	3	1
Grand total	833	100.00	365	250	96	13	109

DEATHS.

The death rate for disease for the United States was 2.83 as compared with 2.30 for 1910. The total number of deaths from all causes was 262, of which 157 were due to disease and 105 from external causes. Of the latter, 55 were accidental, 36 were suicidal, and 14 were homicidal. Among the deaths from diseases, tuberculosis caused 29 deaths in 1911 and 14 in 1910; measles 25 in 1911 and 1 in 1910; pneumonia 18 in 1911 and 23 in 1910; and organic diseases of the heart 16 in 1911 and 15 in 1910.

TABLE NO. 22.—*Deaths among troops serving in the United States, continental (excluding Alaska), year 1911.*

Causes of death.	Number.	Ratio per 1,000 of— Mean strength.	Ratio per 1,000 of— Deaths from disease or external causes.
DISEASE.			
Tuberculosis (of the lungs, 20; of other organs, 9)	29	0.52	184.71
Measles	25	.45	159.23
Pneumonia	18	.32	114.65
Organic disease of the heart	16	.29	101.91
Typhoid fever	6	.11	38.22
Syphilis tertiary	6	.11	38.22
Alcoholism (acute, 2; chronic, 2; delirium tremens, 1)	5	.09	31.85
Cancer	5	.09	31.85
Aneurism	5	.09	31.85
Broncho pneumonia	5	.09	31.85
Appendicitis	5	.09	31.85
Diabetes	4	.07	25.48
Chronic nephritis	4	.07	25.48
Acute cerebrospinal meningitis	2	.04	12.74
Septicemia	2	.04	12.74
Cerebral meningitis	2	.04	12.74
Apoplexy	2	.04	12.74
Pleurisy	2	.04	12.74
Acute nephritis	2	.04	12.74
Nephrolithiasis	2	.04	12.74
Cirrhosis of the liver	2	.04	12.74
Hepatic abscess	2	.04	12.74
Tetanus	1	.02	6.37
Leukemia	1	.02	6.37
Embolism	1	.02	6.37
Intestinal obstruction	1	.02	6.37
Duodenal ulcer	1	.02	6.37
Acute yellow atrophy of the liver	1	.02	6.37
Total deaths for disease	157	2.83	1,000.00
EXTERNAL CAUSES.			
Suicidal:			
By gunshot wounds (revolvers, 15; rifle, 12; shotgun, 1)	28	.51	266.67
By poisoning (phenol, 2; illuminating gas, 2; morphine, 1)	5	.09	47.62
By hanging	2	.04	19.05
By drowning	1	.02	9.52
Total suicides	36	.65	342.86
Homicidal:			
By gunshot wounds (by comrades' rifle, 2; revolver, 1-3; by civilians' revolver, 3; by policeman, revolver, 2; by sentry while attempting to escape, rifle, 2; by escaping prisoner, rifle, 1)	11	.20	104.76
By fracture of skull (in brawls, instruments unknown)	2	.04	19.05
By penetrating incised wound of abdomen (civilian, weapon unknown)	1	.02	9.52
Total homicides	14	.25	133.33
Accidental:			
By crushing (railroad accidents and injuries, 8; cave-in of banks, 2; thrown from and run over by escort wagon, 1; run over by battery limber, 1; fall from high place, 1; struck by automobile, 1; runaway team, 1; struck by street car, 1; rupture of small intestines by kick while playing football, 1)	17	.31	161.90

TABLE No. 22.—*Deaths among troops serving in the United States, continental (excluding Alaska), year 1911*—Continued.

Causes of death.	Number.	Ratio per 1,000 of— Mean strength.	Deaths from disease or external causes.
EXTERNAL CAUSES—continued.			
Accidental—Continued.			
By drowning (while bathing, 6; circumstances not given, 3; by falling into the water, 2; upsetting of canoe, 1; while attempting to swim ashore from disabled sailboat, 1)	13	0.23	123.81
By fracture of skull (railroad accidents and injuries, 2; by falling from high places, 2; by falling down stairways, 2; struck by automobiles, 2; by heavy timbers falling on soldier, 1; run over by street car, 1; thrown from wagon in a runaway, 1; circumstances not known, 1)	12	.22	114.29
By absorption of deleterious gases (illuminating gas, 2; general anesthesia, 1)	3	.05	28.57
By electric shocks	2	.04	19.05
By acute narcotic poisoning	2	.04	19.05
By fracture of spine due to falling from high place	1	.02	9.52
By dislocation of fifth cervical vertebra, thrown in wrestling bout	1	.02	9.52
By concussion of brain, struck by railroad train	1	.02	9.52
By lacerated wound of abdomen, thrown from automobile	1	.02	9.52
By wood alcohol poisoning	1	.02	9.52
By exposure and exhaustion, while wandering over the country, during an attack of mental derangement	1	.02	9.52
Total accidental	55	.99	523.81
Total external causes	105	1.89	1,000.00
Deaths from disease	157	2.83	599.24
Deaths from external causes	105	1.89	400.76
Grand total	262	4.73	1,000.00

PREVALENCE OF SPECIAL DISEASES.

TYPHOID FEVER.

Forty-four cases of typhoid fever (officers and enlisted men) occurred during the year in the Army stationed within the geographical limits of the United States, with six deaths as compared with 142 cases with 10 deaths in 1910, and 173 cases with 16 deaths in 1909. The following table shows the distribution at the different posts:

TABLE No. 23.—*Typhoid fever at military stations, 1911.*

	Admitted.	Days treated.	Constantly sick.	Died.
Maneuver camps	6	41	0.11	.....
Fort Logan, Colo.	5	525	1.44	.....
Jefferson Barracks, Mo.	3	279	.76	.....
Fort Sheridan, Ill.	3	143	.39	.....
Washington Barracks, D. C.	3	6	.02	.....
Fort Caswell, N. C.	3	283	.78	.....
Army and Navy General Hospital, Hot Springs, Ark.	2	166	.45	.....
Fort Porter, N. Y.	2	128	.35	.....
Fort Monroe, Va.	2	233	.64	.....
Fort Sam Houston, Tex.	2	256	.70	.....
13 other stations having 1 case each	13	1,056	2.89	4
Remaining from previous year and admitted by transfer	.....	1,356	3.72	2
Total	44	4,472	12.25	6

The admission and death rates for this disease were 0.76 and 0.10, respectively. These rates for 1910 were 2.42 and 0.17 and for 1909, 3.03 and 0.28. The case mortality was 13.6 per cent as compared with 7.4 per cent for 1910 and 9.2 per cent for 1909. This case mortality rate is rather high for the Army in the United States. On the other hand, it will be noticed in the table on page 51 that 12 cases occurred among the American troops in the Philippine Islands and 12 among the native troops without a single death. Not a single case occurred among officers in the United States and only one in the Philippine Islands, that one being the case of an officer which occurred while he was on leave in Japan, but which was credited to the Philippine Islands.

The rate of incidence for white troops (officers and enlisted men) was 0.82 and for colored troops 0.34.

The following comparative table shows the most important variations in the occurrence of this disease in various posts for the year 1911 as compared with 1910, 1909, 1908, and 1907.

TABLE No. 24.—*Typhoid fever admissions at certain posts.*

Post.	1911	1910	1909	1908	1907
Fort Logan, Colo	5	2	1	2	2
Jefferson Barracks, Mo	3	6	1	3	2
Fort Sheridan, Ill	3	6	3	1	.....
Washington Barracks, D. C	3	7	4	1	2
Fort Caswell, N. C	3	1	.....	3	2
Army and Navy General Hospital, Hot Springs, Ark.	2	1	5	2	.....
Fort Porter, N. Y	2	2	1	.....	.....
Fort Monroe, Va	2	5	6	6	4
Fort Sam Houston, Tex	2	2	8	2	16
Fort Niagara, N. Y	1	3	18	.....	1
Fort Leavenworth, Kans	1	7	7	3	12
Columbus Barracks, Ohio (recruit depot)	1	4	3	6	10
Fort Slocum, N. Y. (recruit depot)	1	5	.....	1	6
Fort D. A. Russell, Wyo	.....	16	35	1	1
Fort Des Moines, Iowa	.....	5	2	10	3
Fort Sill, Okla	.....	1	16	2	.....
Fort McPherson, Ga	.....	1	10	.....	.....
Total admissions for year	44	142	173	136	124
Ratio per thousand	0.76	2.42	3.03	2.94	3.53

CHART J.—*Showing (for the United States proper) the relative admission, death, discharge, and noneffective ratios per thousand of mean strength for the five diseases causing the highest rates in 1911.*

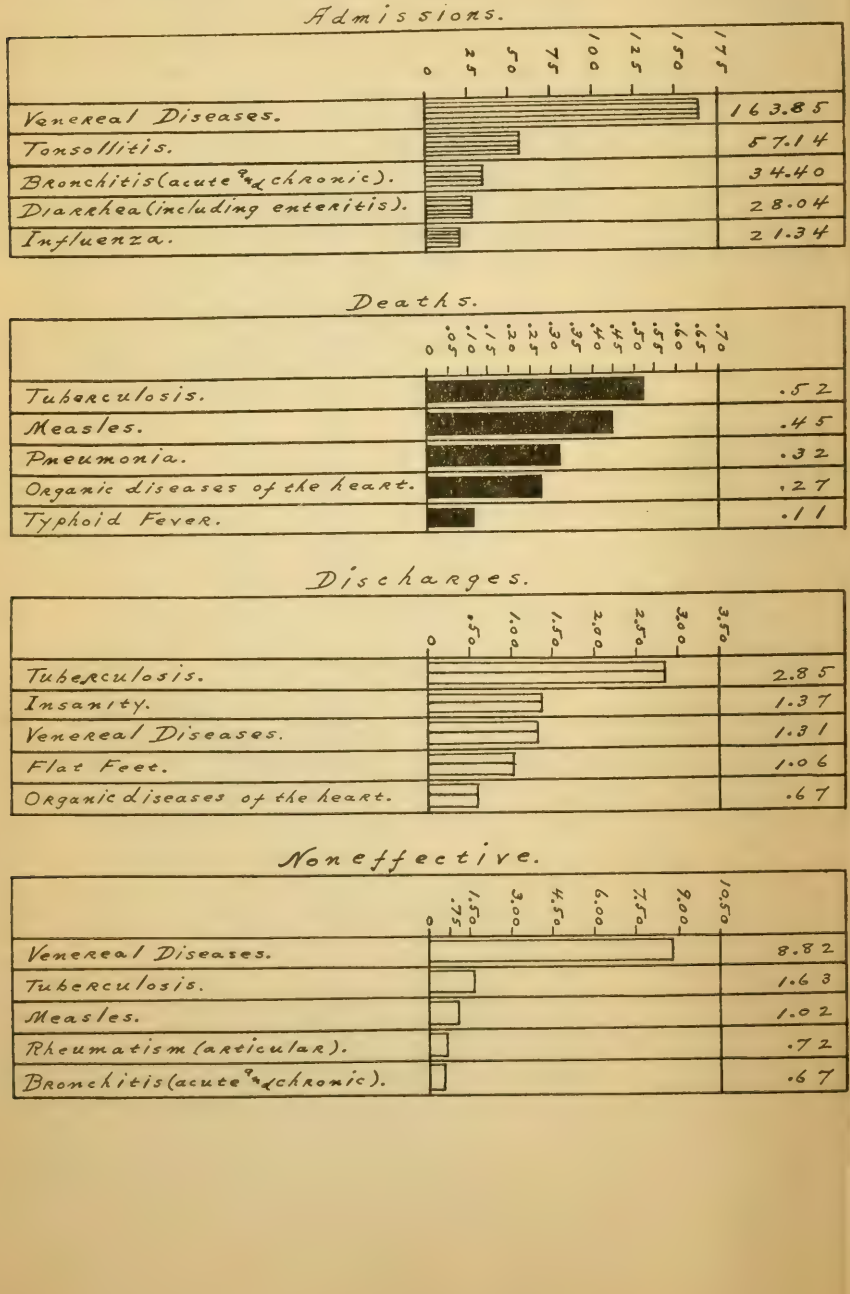
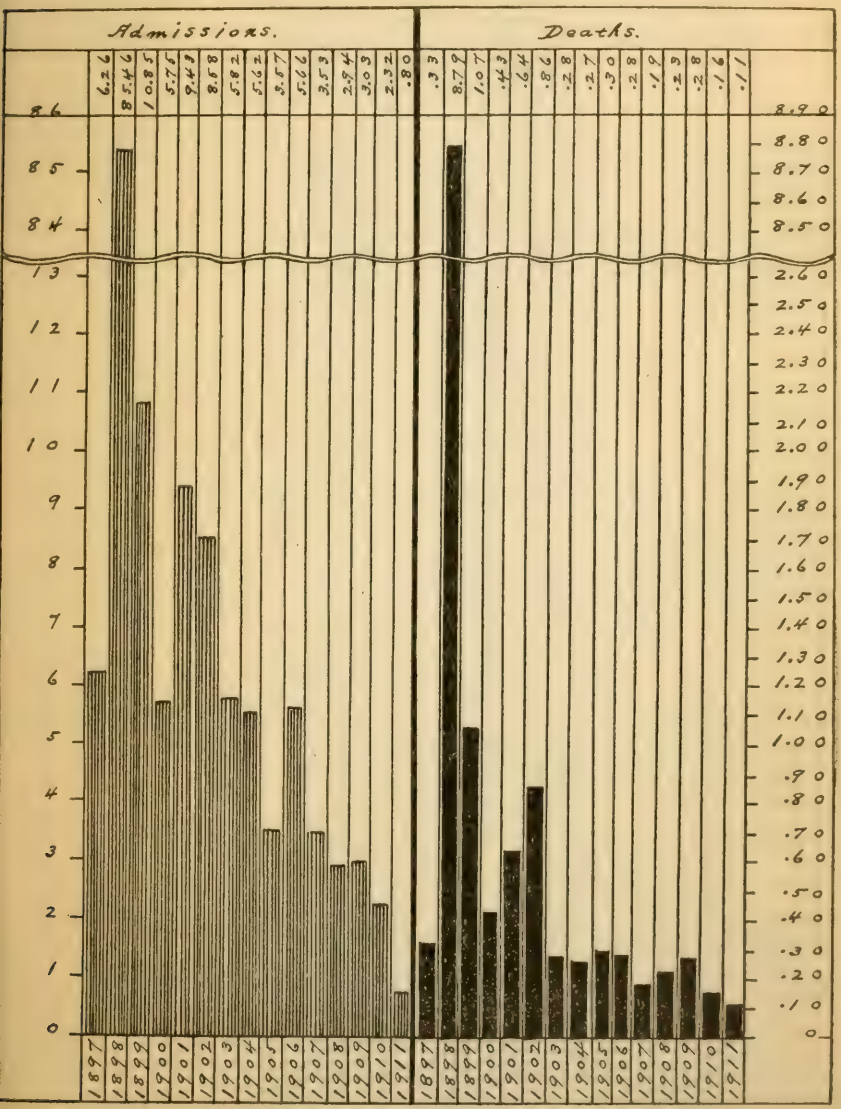


CHART K.—*Showing (for the United States proper) the admission and death ratios per thousand of mean strength for typhoid fever, by years, since 1897.*



The following list shows for the entire Army, officers and enlisted men, the place and date of the occurrence of each case of typhoid and paratyphoid fever, whether the typhoid prophylactic had been given, the result of the attacks, and such other information as is considered necessary under remarks:

	Place of occurrence.	Date when admitted to hospital.	Was typhoid prophylactic given?	Result.	Remarks.
		1911.			
1	Columbus Barracks	Jan. 7	No	Died	Infection prior to enlistment.
2	Madison Barracks	Jan. 10	No	do	
3	Fort Niagara	Jan. 12	No	Recovered	
4	Fort Slocum	Feb. 6	No	do	Do.
5	Watervliet Arsenal	do	No	Died	
6	Jefferson Barracks	Feb. 15	No	Recovered	
7	Fort Monroe	Mar. 5	No	do	
8	Fort Stevens	Mar. 9	No	Died	
9	Fort Monroe	Mar. 10	No	Recovered	
10	Fort Screven	Apr. 11	No	do	
11	Fort Logan	Apr. 18	No	do	
12	Fort Sheridan	Apr. 23	No	do	
13	Point Loma	Apr. 26	Yes	do	
14	Fort Caswell	Apr. 29	No	do	
15	do	do	No	do	
16	do	Apr. 30	No	do	
17	Fort Porter	May 3	No	do	
18	Fort Logan	May 8	No	do	
19	Maneuver Division	May 9	Yes	do	
20	Fort Hancock	May 13	No	do	
21	Fort Logan	June 10	No	do	Do.
22	Point Loma	June 12	Yes	do	
23	Fort Wayne	June 19	No	do	
24	Fort Logan H. Roots	June 23	No	do	
25	Fort Andrews	July 10	No	do	
26	San Antonio (infirmary)	do	Yes	do	
27	Jefferson Barracks	July 11	No	do	Do.
28	Fort Logan	July 17	No	do	
29	Fort Leavenworth	Aug. 1	No	do	Infection while absent in desertion, not in line of duty.
30	Fort Worden	Aug. 10	No	do	
31	Washington Barracks	Aug. 11	No	do	
32	do	Aug. 16	No	Died	
33	do	Aug. 20	No	Recovered	
34	Fort Sheridan	Aug. 21	No	do	
35	Plattsburg Barracks	do	No	do	
36	Jefferson Barracks	Sept. 2	No	do	Infection prior to enlistment.
37	Fort Sheridan	Sept. 24	No	do	
38	Fort Sam Houston	Sept. 25	Yes	do	
39	Fort Logan	Sept. 29	No	do	Do.
40	Hot Springs, Ark	Oct. 4	No	do	
41	Fort Sam Houston	Oct. 13	Yes	do	
42	do	do	Yes	do	
43	Hot Springs, Ark	Oct. 17	No	do	
44	Fort Porter	Nov. 4	No	do	
	AMERICAN TROOPS, PHILIPPINE ISLANDS.				
1	Fort Mills	Jan. 12	Yes	Recovered	
2	Cuartel de Espana	Mar. 18	No	do	
3	In Japan (on leave)	June 1	Yes	do	
4	Field, Luzon	June 19	No	do	
5	Fort Mills	June 22	No	do	
6	Camp Stotsenberg	Sept. 12	No	do	
7	do	Sept. 19	No	do	
8	Ludlow Barracks	Oct. 20	No	do	
9	Camp Wilhelm	Nov. 28	No	do	
10	Camp Downes	do	Yes	do	
11	Fort William McKinley	Dec. 11	No	do	
12	Camp McGrath	Dec. —	Yes [1]		Immunization not completed.
	NATIVE TROOPS, PHILIPPINE ISLANDS.				
1	Makar	Feb. 1	No	Recovered	
2	Camp Overton	Feb. 4	No	do	

[1] One dose July, 1910.

NOTE.—In the United States, one additional death in January, remaining case from 191[illegible]

	Place of occurrence.	Date when admitted to hospital.	Was typhoid prophylactic given?	Result.	Remarks.
	NATIVE TROOPS, PHILIPPINE ISLANDS—continued.	1911.			
3	Florida Blanca	Feb. 11	No	Recovered	
4	do	do	No	do	
5	Cotabato	Apr. 7	No	do	
6	Sequijor	Aug. 6	No	do	
7	do	Oct. 8	No	do	
8	Cotabato	Oct. 20	No	do	
9	do	do	No	do	
10	do	do	No	do	
11	do	do	No	do	
12	Camp Connell	Dec. 28	No	do	
	TRANSPORTS.				
1	U. S. A. T. Burnside	Dec. 22	No	Died	Infection while absent without leave not in line of duty.
	NATIVE TROOPS, PORTO RICO.				
1	San Juan	Dec. 28	Yes	Died	
	PARATYPHOID.				
1	Fort Screven, Ga	May 29		Recovered	
2	Camp Otis, Panama	Dec. 3		do	

The following is a tabulation of these cases:

Typhoid fever, United States Army, calendar year of 1911, officers and enlisted men.

	Cases.	Ratio per 1,000 mean strength.	Deaths.	Ratio per 1,000 mean strength.	Cases in immunized persons.	Deaths in immunized persons.
United States	44	0.76	6	0.10	7	0
Philippine Islands:						
American troops (including officers)	12	.88	0	0	3	0
Transports	1	.56	1	.55	0	0
Native troops (no prophylactic used)	12	2.28	0	0	0	0
Porto Rican native troops	1	1.78	1	1.78	1	1
Total Army	70	.91	8	.10	11	1
PARATYPHOID FEVER.						
United States	1	0.02	0	0	0	0
Panama	1	4.69	0	0	0	0

It will be noticed from the tabulation above that not a single epidemic of the disease occurred in the United States Army during the year. At only four posts did more than one case occur during any one month, and there was very clearly no connection between any of these cases. Six of the cases in the United States were in recruits, who were in the incubation stage when enlisted.

In the last annual report of this office, the statement was made that only one case of typhoid occurred in the military population at the Maneuver Camp at San Antonio and one at the separate brigade camp at San Diego, Cal. Later information showed that one additional case occurred at each camp. The second case at San Antonio was admitted to the hospital on July 10. The Maneuver Division was discontinued July 14. This case was hence not included in the report of the chief surgeon of the division as the diagnosis was not

made when his report was written. The second case at San Diego (Camp Point Loma) was admitted to hospital June 12, with a diagnosis of fever, type undetermined, and the revised diagnosis of typhoid fever was not made until July 22. There are two other cases credited in the table to the maneuver camps. These cases occurred among the troops in camp around San Antonio, but several months after the division as such was discontinued, and should not be credited to the record of the Maneuver Division in camp at San Antonio until July 14.

VACCINATION AGAINST TYPHOID FEVER.

It may now be said with a fair degree of assurance that the entire Army has been immunized against typhoid fever by the use of the typhoid prophylactic. A census of the entire Army taken on December 13, 1911, showed that there were 11,383 persons connected with the military establishment who had not at that time received the prophylactic. The work has, however, been actively continued since that time and it is very probable as stated above that all not excused for age have been immunized at this date.

As the immunization of the Army is now complete it will be of interest, even if there is some repetition of matter found in other reports, to give a full history of the development of this sanitary measure in the United States Army.

During the summer of 1908, Capt. (now Maj.) F. F. Russell, Medical Corps, United States Army, was sent to Europe to make a study of the methods in use in England and Germany for the prevention and stamping out of typhoid-fever epidemics, both in the Army and among the civil population. Upon his return to the United States a special board was called to consider this subject, the proceedings of which are recorded in the following order:

General Orders, No. 10.

WAR DEPARTMENT,
Washington, January 21, 1909.

The proceedings of the board of officers convened by paragraph 12, Special Orders, No. 279, War Department, December 1, 1908, which are approved by the Secretary of War, are published to the Army for the information of all concerned:

Proceedings of a board of officers convened by virtue of the following order:

[Extract.]

12. A board of medical officers to consist of Brig. Gen. Robert M. O'Reilly, Surgeon General; First Lieut. Victor C. Vaughan, Medical Reserve Corps; First Lieut. William T. Councilman, Medical Reserve Corps; First Lieut. John H. Musser, Medical Reserve Corps; First Lieut. Alexander Lambert, Medical Reserve Corps; First Lieut. Simon Flexner, Medical Reserve Corps; First Lieut. William S. Thayer, Medical Reserve Corps; Capt. Frederick F. Russell, Medical Corps, recorder, is appointed to meet in this city on December 7, 1908, for the purpose of investigating the question of the advisability of immunizing the Regular and, in case of war, the Volunteer Army against typhoid fever.

Upon the adjournment of the board the officers of the Medical Reserve Corps will return to their homes or the places of receipt by them of this order. The travel directed is necessary in the military service.

* * * * * * *

By order of the Secretary of War:

J. FRANKLIN BELL,
Major General, Chief of Staff.

Official:
HENRY P. MCCAIN,
Adjutant General.

The board met at 2 p. m., all the members being present.

It proceeded to review the history of vaccination as a method of protecting troops against typhoid fever. The experience of both the English and the German colonial armies was considered.

The theory on which the practice is based as well as many details involved in carrying out the procedure were considered, as was also the probable effect on the medical profession and the public at large in the United States.

As a result of several hours discussion the board adopted, without any dissenting voices, the following conclusions:

I. The board is convinced that the practice of antityphoid vaccination is both useful and harmless and that it offers a practicable means of diminishing the amount of typhoid fever in the Army both in times of peace and war.

II. It finds that the experience to date with antityphoid vaccination justifies it in recommending the introduction of the practice in the Regular and Volunteer Armies in time o war.

III. It recommends the immediate introduction of the practice of voluntary vaccination against typhoid in the Hospital Corps, the Army Nurse Corps, and in any expedition of troops from the Regular Army which is ordered to take the field for active operations; and, further, that an opportunity be given to volunteers from the Army as a whole to be protected by vaccination against typhoid.

There being no further business before it the board adjourned sine die.

R. M. O'Reilly,
Surgeon General, U. S. Army, President.

F. F. Russell,
Captain, Medical Corps, U. S. Army, Recorder.

(1457135 A.—A. G. O.)

By order of the Secretary of War.

J. Franklin Bell,
Major General, Chief of Staff.

Official:
Benj. Alvord,
Adjutant General.

Until the spring of 1911 when the troops were mobilized in the Maneuver Camps at San Antonio, Tex., and in the separate brigades at Galveston, Tex., and San Diego, Cal., only volunteers received the prophylactic in the Army. The results obtained up to that time had, however, been so uniformly successful, there having been no unfavorable results, that when the troops were mobilized in the camps mentioned, a telegram was sent to each of the commanding generals as follows:

The Adjutant General's Office,
Washington, March 9, 1911.

* * * * * * *

In view great danger from typhoid fever Secretary War has approved recommendation Surgeon General that troops that participate in maneuvers and that are not already protected against typhoid fever have antityphoid serum administered to them at once, such procedure being contemplated by General Orders, No. 10, War Department, 1909, and General Orders, No. 227, War Department, 1908.

Take action accordingly with regard to troops of your command.

Acknowledge.

By order Secretary War:

McCain, *Adjutant General.*

The beneficial results of this order were discussed in the last report of this office. The results were so excellent that the War Department felt justified in taking another step in advance, and on June 9, 1911, the following order was issued to the Army:

General Orders, No. 76.

War Department,
Washington, June 9, 1911.

* * * * * * *

II. Hereafter the typhoid prophylactic will be administered, as soon as practicable after enlistment and before the men are sent away from the depots or posts at which they are enlisted, to all recruits except those over 35 years of age.

In the case of every recruit to whom the typhoid prophylactic has been administered the fact and date of completion of the administration will be noted on his descriptive and assignment card, and the notation will be transferred therefrom to his descriptive list when that list is made. A similar notation will be made on the descriptive list of every soldier, other than a recruit, to whom the prophylactic is administered.

The typhoid prophylactic is supplied by the Surgeon General.

* * * * * * *

By order of the Secretary of War:

LEONARD WOOD,
Major General, Chief of Staff.

Official:
HENRY P. MCCAIN,
Adjutant General.

The final and concluding step to make this sanitary measure compulsory for the entire Army was published in the following order:

General Orders, No. 134.

WAR DEPARTMENT,
Washington, September 30, 1911.

Paragraph II, General Orders, No. 76, War Department, June 9, 1911, is amended to read as follows:

The typhoid prophylactic will be administered to all officers and enlisted men in the Army under the age of 45 years who have not already received it, or who have not already had a well-defined case of typhoid fever, and who are on duty at stations where the services of a medical officer are available for this purpose. Officers and enlisted men under 45 years of age on detached service, leave, or furlough at places where the services of a medical officer are not available will receive the typhoid prophylactic upon their arrival at the first station where its administration is practicable.

Hereafter the typhoid prophylactic will be administered at the places of enlistment, as soon as practicable after enlistment, to all recruits under 45 years of age who have not been subjected to the prophylaxis within two years, unless because of special assignment or other reason the men are not to remain at the station long enough to allow the completion of the prophylaxis, in which event it will be administered immediately after they join the organizations or stations to which they are assigned. All men reenlisting who have not had the typhoid prophylactic administered to them will be regarded as recruits for the purpose of this order.

On the descriptive and assignment card of every recruit will be noted "Typhoid prophylaxis completed ———" (date) or "Typhoid prophylactic not administered," as the case may be. In the latter case, company and detachment commanders will see that the prophylactic is administered immediately after the men join the organizations or stations to which assigned. In every case where the prophylactic has been administered, the remark "Typhoid prophylaxis completed ———" (date) will be entered on the soldier's descriptive list.

If any soldier under 45 years of age on reenlistment alleges that he has been subjected to the typhoid prophylaxis within two years, and the allegation is not verified by the soldier's medical record, the burden of proof will be upon the soldier to show to the satisfaction of the examining surgeon that he has been subjected to the prophylaxis within two years, or has had a well-defined case of typhoid fever; if the soldier can not present evidence in the matter satisfactory to the examining surgeon, the prophylactic will be administered to him as soon as practicable.

The typhoid prophylactic is supplied by the laboratory of the Army Medical Museum, Washington, D. C.

[1816561, A. G. O.]

By the order of the Secretary of War:

WM. H. CARTER,
Major General, Acting Chief of Staff.

Official:
HENRY P. MCCAIN,
Adjutant General.

It has been fairly demonstrated to the medical profession and the general public that the immunization of troops against typhoid fever by the typhoid prophylactic is a thoroughly practical measure for the prevention of the disease, and that its protective value is only

second in importance to vaccination against smallpox. It will be noticed in the table on page 51 that in the entire Army for the year 1911 there were 70 cases of typhoid, 11 of which were in immunized persons. It was not possible to check up all of these 11 cases or to confirm the diagnosis in all of them by blood cultures. There is a possibility that some of them may have been paratyphoid or fevers of undetermined origin. Since the beginning of the year 1912 each case as it is reported has been carefully investigated. Surgeons are required to furnish a complete history of every case, giving in detail the methods used in arriving at the diagnosis. This office insists that in each case, if possible, the diagnosis be confirmed by a blood culture or by a culture from the feces or urine. Since the Widal reaction occurs in practically all persons who have received the prophylactic and persists in the blood for some time thereafter, it can not be considered as positive evidence of the presence of typhoid fever in an immunized person. It is recognized that it is not possible in every case of typhoid fever to confirm the diagnosis by cultures and it is not the intention of this office to refuse to accept such a diagnosis when the clinical findings are clear. It is believed, however, that in practically all of the cases of typhoid it should be possible to isolate the organisms from the blood, or from the urine or feces, at some time during the course of the disease.

The United States Army is the only one in which this immunization against typhoid fever is mandatory. It is therefore especially desirable that true and accurate statistics should be obtained to determine as far as possible the efficiency of this measure.

Referring again to the tabular statement on page 51, it is interesting to note that 12 cases occurred among the American troops in the Philippine Islands and 12 among the native troops without a single death. In 1910 there were 31 cases among the American troops, with 2 deaths, and 13 cases among the native troops, with 1 death. It is thus apparent that there was a very material reduction in the number of cases among American troops, and but slight reduction in the number among the native troops. This is to be accounted for by the fact that a large percentage of the American troops had been voluntarily immunized against typhoid fever and that none of the native troops had been. General Orders, No. 134, quoted above, was not sent to the printer until September 30, 1911, and the distribution of this order was not begun until some weeks later. Practically no work was done in compliance with this order in the Philippines until early in the present year. The advancement in other sanitary measures had been practically the same for both American and native troops.

During the first six months of 1912, as far as can be determined from the information on hand (up to August 15), 7 cases have occurred in the United States, with 1 death. The following list shows the date and place of occurrence and other information in regard to these cases. During the same period in 1911 there were 24 cases in the United States, with 5 deaths:

Place.	Date when admitted to hospital.	Was the typhoid prophylactic given.	Result.	Remarks.
	1912.			
Fort McDowell	Jan. 8	No	Recovered	
Fort Slocum	Feb. 1	Yes	do	
Columbus Barracks	Feb. 8	No	Died	Infection prior to enlistment.
Do	Mar. 5	No	Recovered	Do.
Washington, D. C.	Mar. 16	No	do	
Field, California	June 4	Yes	do	
Jefferson Barracks	June 24	No	Remaining July 31, 1912.	Do.

Owing to the large number immunized since the last issue of the annual report of this office, it has not been possible to record and tabulate the effects of the vaccination as has been done in reports heretofore. However, there was a sufficient number of cases, with results, published in the last annual report to give a very definite idea relative to this phase of the question. Since that time practically no bad results have been reported. In the case of one officer immunized at the maneuver camp in Texas a neuritis developed in the arm in which the prophylactic was administered. This persisted for several months. It is very probable that in this case the needle was inadvertently introduced into the sheath of one of the small nerves. In a few cases severe reactions have been reported, yet no permanent damage has resulted, normal health being regained in a few days. It is probable that some of these are due to intramuscular injection of the vaccine, with consequent rapid absorption. The directions that have been furnished with the prophylactic have at all times specified that the vaccine should be injected subcutaneously and that it should not be injected directly into the muscles or into the skin itself.

Since the last report of this office the typhoid prophylaxis has been made compulsory for the United States Navy. The prophylactic has been furnished for this purpose by the laboratory of the Army Medical School. Steps have also been taken by the Department of Agriculture and the Department of the Interior to encourage as many as possible of their field employees to voluntarily accept immunization against typhoid by the use of the prophylactic. A letter was addressed by both of these departments to the Secretary of War requesting that the Surgeon General of the Army be allowed to furnish the prophylactic to their respective departments for that purpose. This authority was granted by the Secretary of War, and the material has been furnished. Recently the same request has been received from the Post Office Department. Militia medical officers have been encouraged to secure volunteers among the militia organizations. Some of them have been very active in this work. The Army Medical School has also furnished the prophylactic for their use. The demands for the serum by the Army, Navy, the Militia, and the departments mentioned have been so great that it has been impossible to furnish more than a small quantity to civil communities.

It is recommended that whenever it may become necessary to mobilize either the militia or volunteer troops in the field that this measure be made compulsory for them. In case this is done it is believed that it will be impossible in the future for large epidemics of

typhoid fever to occur in the United States Army. Of course an occasional case will develop, but typhoid fever will cease to be a scourge to the Army in the future as it was in the past, and will disappear even as smallpox has practically disappeared in armies as the result of vaccination. Among the sanitary achievements of the Medical Department in preventive medicine since the time of the Spanish-American War this sanitary measure for the prevention of typhoid fever should, it is believed, rank second in importance only to the discovery of the method of transmission of yellow fever.

VENEREAL DISEASES.

The question of prevention of venereal diseases has during the past year continued to claim much time and attention on the part of medical officers throughout the Army and of this office, and much faithful work has been done in the instruction of recruits and efforts in other ways to prevent exposure to infection and to prevent infection after exposure. It was hoped, therefore, that the good results of this work might be shown in the venereal statistics. This hope has, however, been disappointed so far as the record for syphilis is concerned, and owing to the increased number of cases of that disease the figure for all venereal diseases has increased, as shown in the following tabular statement:

	Entire Army.		Army in the United States proper.	
	1910	1911	1910	1911
Admissions per 1,000	174.95	185.13	155.51	163.85
Original admissions (cases)	154.91	163.49	137.98	145.29
Constantly noneffective rate	11.51	10.14	10.14	8.82

The following tables give the occurrence of venereal diseases in the Army and the comparative rates for the past five years for each of these diseases in the United States:

TABLE NO. 25.—*Venereal diseases—Admissions and discharges, Army, American troops, year 1911.*

[Mean strength—72,748.]

	Syphilis.		Chancroids.		Gonorrhea.		Total.	
	Admissions.	Discharges.	Admissions.	Discharges.	Admissions.	Discharges.	Admissions.	Discharges.
United States	2,447	29	1,383	.....	5,221	44	9,051	73
Alaska	7	.....	1	.....	31	.....	39	.....
Hawaii	102	4	32	.....	219	1	353	5
Philippines	972	2	1,102	1	1,726	5	3,800	8
Canal Zone, Panama	8	.....	7	.....	9	.....	24	.....
Transports	38	.....	35	.....	127	.....	200	.....
Total	3,574	35	2,560	1	7,333	50	13,467	86
Ratio per 1,000 of mean strength	49.13	0.48	35.20	0.01	100.80	0.68	185.13	1.18

Days	269,329
Constantly sick	737.89
Ratio per 1,000	10.14

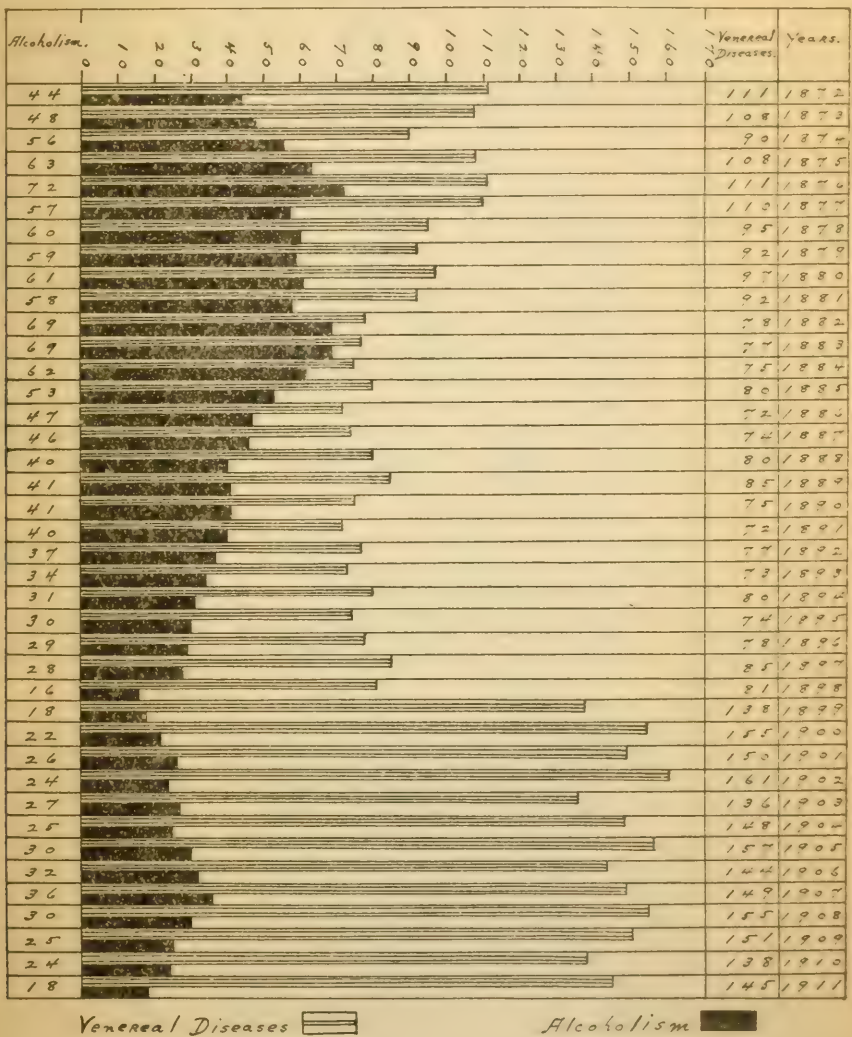
TABLE No. 26.—*Venereal diseases by years, 1907 to 1911, United States, continental (excluding Alaska).*

	Admitted.			Discharged on certificate of disability.			Died.			Noneffective.		
	Total.	White.	Colored.	Total.	White.	Colored.	Total.	White.	Colored.	Total.	White.	Colored.
Gonorrhea and results:												
1911	94.52	94.48	95.12	0.79	0.84	.....	.....	.....	.....	4.68	4.72	3.93
1910	102.44	102.17	107.17	.77	.78	0.67	.....	.....	.....	5.90	5.98	4.41
1909	125.27	124.49	147.37	1.36	1.34	2.08	.....	.....	.....	7.22	7.23	7.02
1908	123.50	123.05	151.93	1.06	1.08	.....	.....	.....	.....	6.71	6.72	6.18
1907	107.68	107.68	107.59	1.39	1.37	1.92	0.03	.....	0.96	6.24	6.29	4.63
Chancroid:												
1911	25.04	25.22	21.82	.....	.....	.....	.....	.....	.....	1.32	1.34	1.05
1910	26.42	25.83	36.84	.....	.....	.....	.....	.....	.....	1.53	1.51	1.86
1909	25.33	25.09	32.13	.....	.....	.....	.....	.....	.....	1.54	1.52	2.03
1908	28.20	27.64	63.54	.04	.02	1.38	.....	.....	.....	1.75	1.71	4.38
1907	34.78	34.38	48.03	.....	.....	.....	.....	.....	.....	2.23	2.21	2.73
Syphilis:												
1911	44.30	45.33	25.91	.52	.48	1.36	.11	0.11	.....	2.82	2.85	2.30
1910	26.65	26.68	26.12	1.13	1.16	.67	.04	.04	.....	2.71	2.75	2.07
1909	26.85	26.47	37.74	1.92	1.81	5.19	.....	.....	.....	2.68	2.64	3.74
1908	23.15	22.46	66.30	1.62	1.64	.....	.04	.04	.....	2.17	2.14	3.46
1907	25.36	25.43	23.05	2.36	2.43	.....	.....	.....	.....	2.75	2.76	2.45
Total venereal:												
1911	163.85	165.03	142.85	1.31	1.31	1.36	.11	.11	.....	8.82	8.91	7.29
1910	155.51	154.69	170.13	1.90	1.94	1.34	.04	.04	.....	10.14	10.25	8.34
1909	177.46	176.04	217.24	3.28	3.14	7.27	.....	.....	.....	11.44	11.39	12.79
1908	174.84	173.14	281.77	2.73	2.75	1.38	.04	.04	.....	10.63	10.57	14.02
1907	167.82	167.49	178.67	3.74	3.80	1.92	.03	.....	.96	11.22	11.26	9.81

It will be seen from these tables that the rate for venereal diseases (all) was 163.85 in 1911, as compared with 155.51 in 1910. Upon further analysis, however, it will be noticed that the rate for gonorrhea was only 94.52 per 1,000 in 1911, as compared with 102.44 for 1910, or a decrease of 8.92 per 1,000, and that for chancroids it was 25.04 in 1911, as compared with 26.42 in 1910, or a decrease of 1.38 per 1,000. It is apparent, therefore, that the only increase has been in the admission rate for syphilis. This rate for 1911 was 44.30, as compared with 26.65 for 1910, or an increase of 17.65 per 1,000, or 66.2 per cent.

The rate for syphilis prior to 1911 had been quite uniform for several years, but there has been a striking increase in the number of cases during 1911, so that there was a case rate per 1,000 of 40.1 as compared with 24.6 in 1910, and a similar rate for preceding years. This increase is not due to an increase in exposure, because the case rate for other venereal diseases is diminished as shown by Table No. 26, that for gonorrhea having dropped from 100.8 per 1,000 in 1910, to 90.5 in 1911. It can be traced to the use of the Wassermann reaction, which has revealed the syphilitic nature of many cases not recognized before, and to the introduction of salvarsan in January, 1911, which has greatly stimulated interest in the treatment of the disease. In some posts a Wassermann survey of the entire garrison has been made and naturally many latent cases have been discovered and recorded. The reaction has also been used on many recruits and in discharge proceedings. The effect of the introduction of salvarsan is seen in the fact that over 2,100 cases were treated in 1911. This is over 70 per cent of the total and in the preceding year only 1,764 cases were recorded. In short the rate of 40.1

CHART L.—*Showing (for the United States, exclusive of Alaska, beginning 1904) the admission rates for venereal diseases and alcoholism, years 1872–1911.*



represents the maximum of infection which could be found by active efforts, while the usual rate of about 25 represents the more active and obvious cases which demand attention.

The following table shows the admission rate for syphilis for the past five years in the various stages:

TABLE NO. 27.—*Syphilis, United States, years 1907–1911.*

Year.	Primary syphilis.		Secondary syphilis.		Tertiary syphilis.		Hereditary syphilis.		Total.	
	Admission rates.	Non-effective rates.	Admission rates.	Non-effective rates.	Admission rates.	Non-effective rates.	Admission rates.	Non-effective rates.	Admission rates.	Non-effective rates.
1907	2.62	0.21	20.75	2.32	1.99	0.23	.....	.....	25.36	2.75
1908	2.57	.14	18.31	1.71	2.27	.31	.....	.....	23.15	2.17
1909	3.20	.24	21.67	2.17	1.96	.27	0.02	0.0001	26.85	2.68
1910	3.24	.23	19.96	2.00	2.01	.36	.12	.01	25.33	2.60
1911	4.09	.26	35.54	2.14	4.29	.43	.38	.02	44.30	2.85

The greatest increase was clearly for the secondary cases. It is clear to this office that the reason for this increase is for the reason above stated, (1) due to the discovery of latent cases by the use of the Wassermann test, and (2) on account of the large number of cases admitted to hospital for treatment with salvarsan. It appears from the following quotations that this opinion is shared by quite a few medical officers throughout the service.

Maj. Patterson, Fort Banks, Mass.:

Recently there have been 11 new cases and 6 old cases of venereal diseases admitted to hospital, or a total of 17 different men. Of this number 8 were cases of gonorrhea and 9 syphilis. These 17 men have had altogether, during the period mentioned, 25 admissions. This is due to the fact that the leutic cases were admitted 17 times to receive salvarsan. The six old men were men that I knew had lues from old records, and on returning to the post I had them admitted whenever their Wassermann reactions indicated it.

Maj. Wilson, Fort McKinley:

Of the 33 cases of syphilis taken into hospital only a few lost more than one or two days by reason of this disease. Most of them were admitted to hospital solely for administration of the salvarsan treatment and were returned to duty the next day. Salvarsan was administered 34 times for syphilis.

When the Army posts in the United States were reorganized for the purpose of military administration into three divisions on July 1, 1911, the department chief surgeons were discontinued. The considerable additional territory included in the Departments of the Gulf and of Texas was thus brought under the jurisdiction of the chief surgeons of the Eastern and Central Divisions, Col. Hoff and Col. Maus, respectively, both of whom had been very active in the venereal campaign. Steps were at once taken by both of them to have systematic inspections made in their new territory such as had before been made in the departments of which they were chief surgeons. On account of these inspections quite a number of venereal cases were detected and brought upon sick report which otherwise would not have been reported.

Maj. Whitmore, Fort Barrancas, Fla.:

One result has been to raise the rate of venereal diseases, as the men were previously concealing their venereal diseases or getting treatment from physicians in town. This was known to the surgeon from talking to the physicians in town.

Lieut. Chilton, Fort Caswell, N. C.:

While it has resulted in an increased number of venereal diseases on sick report, it has led to the discovery of cases of syphilis and gonorrhea in their most infectious states, that probably would not have applied for treatment voluntarily.

It is clear, therefore, that the figures given on page 58 do not show as great a decrease for admissions for gonorrhea and chancroids as the conditions would really warrant. These examinations in this new territory undoubtedly increased the rate for admission for them and also for syphilis.

A study of the figures for the different departments as they existed in 1910, and the early part of 1911, show that there was a decrease in 1911 for the total venereal rate in the department of the East, Department of the Lakes, Department of Missouri, Department of California, and the Department of the Columbia. There was a material increase in the Department of the Gulf and the Department of Texas. It is not possible to compare the figures for the Department of Dakota and the Department of Colorado as these two departments were discontinued July 1, 1911. The Department of the Gulf and Department of Texas were on July 1, 1911, included in the Eastern and Central Divisions, respectively, and the inspections referred to above were instituted by the chief surgeons of these divisions somewhat later in the year.

Attention has been frequently called to the fact that the noneffective rate is the true measure of the effect of sickness on the military efficiency of the Army. By referring to table 26 on page 58 it will be noticed that the noneffective rate for 1911 was 8.82 per each 1,000 strength as compared with 10.14 for 1910. Thus, while the admission rate was greater, the efficiency of the Army was improved.

Col. Hoff, in his annual report for 1911, as chief surgeon of the Eastern Division, has compiled figures to show that in January, 1910, the constant noneffective rate (monthly) for venereal diseases in the Department of the East was 9.68 per 1,000. This rate was constantly reduced and in December, 1911, was 4.84 per 1,000. He states that certainly these results justify the claim that the antivenereal campaign has been effective. He also states that the noneffective rate for the Department of the Gulf for July, 1911, a month after he assumed charge as chief surgeon, was 13.27 per 1,000, and that this had been slightly reduced in December to 10.88.

It will be observed that the measures so successfully carried out in the Department of the East and which were put into force in the Department of the Gulf July last have already somewhat reduced the noneefficiency from venereal diseases there, and have resulted in adding seven rifles daily to the firing line. These have not thus far been so successful in effect as in the Department of the East simply because the team play is not so good. Medical and line officers must work together if venereal diseases are to be controlled. The former can not successfully do it alone. (Report for calendar year 1911.)

The following table shows the admission rates per 1,000 in the various divisions, camps, and independent posts in the United States, for venereal diseases, year 1911:

Venereal diseases, year 1911.

	Admissions.		Mean strength.
	Total.	Ratio.	
Eastern Division	2,711	149.00	18,195
Central Division	2,382	173.67	13,716
Western Division	1,220	116.65	10,459
Maneuver camps	1,125	135.33	8,313
Independent posts	84	51.82	1,621
Recruit depots	1,430	275.74	5,186
General hospitals	120	190.78	629
Alaska	39	33.28	1,172
Hawaii	353	165.26	2,136

It will be seen from this table that the Western Division had the lowest admission rate, while the Central Division had the highest. As no well directed, systematic effort had been made in the Western Division as a whole to lessen the prevalence of venereal diseases, these figures would seem to indicate that venereal prophylaxis is unnecessary. Such, however, is not believed to be true. The Western Division includes several posts where prostitutes, and consequently venereal diseases, are very rare in the vicinity. This is especially true of the posts in the Southwest. In addition it is understood that some attempt was made by the civil authorities in the communities adjacent to several of the posts of the Northwest and in the vicinity of San Francisco, to regulate and examine the prostitutes.

TABLE No. 28.—*Showing mean strength, officers and enlisted men, admissions and ratios per thousand, for venereal diseases, in posts of more than 300 men, in the United States (including Alaska) and Hawaii, 1911.*

		Relative standing on list previous year.	Admissions.		Mean strength.
			Total.	Ratio.	
1	Fort McPherson, Ga.	6	145	464.74	312
2	Fort Snelling, Minn.	17	145	299.59	484
3	Fort Screven, Ga.	7	115	288.94	398
4	Fort Sam Houston, Tex.	5	471	279.19	1,687
5	Fort Barrancas, Fla.	30	128	267.22	479
6	Fort Washington, Md.	14	94	223.81	420
7	Fort D. A. Russell, Wyo.	27	377	220.08	1,713
8	Fort Oglethorpe, Ga.	25	69	212.96	324
9	Fort Howard, Md.	2	84	206.90	406
10	Fort Crook, Nebr.	4	103	192.16	536
11	Fort Bliss, Tex.	.....	70	183.73	381
12	Fort Sill, Okla.	36	86	182.59	471
13	Fort Wayne, Mich.	15	85	180.08	472
14	Presidio, San Francisco, Cal.	19	365	179.98	2,028
15	Fort Andrews, Mass.	16	77	179.49	429
16	Fort Hamilton, N. Y.	12	83	178.88	464
17	Schofield Barracks, Hawaii	24	245	177.92	1,377
18	Fort McKinley, Me.	18	112	170.99	655
19	Fort Moultrie, S. C.	13	64	168.42	380
20	Fort McIntosh, Tex.	.....	55	165.17	333
21	Fort Monroe, Va.	9	194	164.69	1,178
22	Fort William H. Harrison, Mont.	.....	49	162.25	302
23	Fort Morgan, Ala.	35	53	156.80	338
	UNITED STATES (officers and enlisted men)	.....	9,072	156.09	58,119
24	Fort Huachuca, Ariz.	.....	76	155.42	489
25	Presidio of Monterey, Cal.	42	123	151.66	811
26	Fort Totten, N. Y.	29	98	149.62	655

TABLE NO. 28.—*Showing mean strength, officers and enlisted men, admissions and ratios per thousand, for venereal diseases, in posts of more than 300 men, in the United States (including Alaska) and Hawaii, 1911*—Continued.

		Relative standing on list previous year.	Admissions.		Mean strength.
			Total.	Ratio.	
27	Fort Leavenworth, Kans (Post)	37	203	148.28	1,369
28	Fort Jay, N. Y	43	50	147.93	338
29	Fort Caswell, N. C	49	47	145.51	323
30	Fort George Wright, Wash	48	68	136.00	500
31	Fort Sheridan, Ill	21	153	131.33	1,165
32	Fort Myer, Va	47	90	131.20	686
33	Fort H. G. Wright, N. Y	22	65	130.00	500
34	Fort Baker, Cal	20	48	126.98	378
35	Fort Ethan Allen, Vt	1	104	125.91	826
36	Fort Williams, Me	31	67	125.70	533
37	Fort Douglas, Utah	46	61	123.98	492
38	Washington Barracks, D. C	39	81	123.10	658
39	Fort Du Pont, Del	53	52	121.50	428
40	Fort Riley, Kans	40	230	120.99	1,901
41	Madison Barracks, N. Y	8	60	114.29	525
42	Fort Lawton, Wash	26	35	113.64	308
43	Fort Hancock, N. J	45	65	106.56	610
44	Vancouver Barracks, Wash	33	104	99.33	1,047
45	Fort Adams, R. I	32	49	86.27	568
46	Plattsburg Barracks, N. Y	60	69	85.19	810
47	Fort Clark, Tex	.....	25	83.06	301
48	Fort Casey, Wash	57	24	77.17	311
49	Fort Terry, N. Y	34	41	73.35	559
50	Fort Mackenzie, Wyo	41	26	71.63	363
51	Fort Robinson, Nebr	50	35	71.28	491
52	Fort Stevens, Oreg	51	23	70.77	325
53	Fort Flagler, Wash	44	22	68.11	323
54	Fort Yellowstone, Wyo	52	21	58.01	362
55	West Point, N. Y (soldiers)	59	30	39.79	754
56	Fort Niagara, N. Y	55	10	33.22	301
57	Fort Greble, R. I	.....	7	22.29	314
58	Fort Worden, Wash	61	10	15.53	644
59	Fort William H. Seward, Alaska	.....	4	12.31	325

NOTE.—The above figures represent the cases and strength of entire command at each post mentioned; if the officers be excluded the rates will be slightly larger. That for the United States (at home) including officers is only 156.09 as against 163.85 if officers be excluded.

On January 26, 1912, a letter was sent to The Adjutant General of the Army by this office with the request that a copy of it be referred to each post surgeon in this country and outlying possessions, in which information was requested as to the amount and character of the instruction given to soldiers with reference to the reproductive system and the dangers of incontinence, the methods of preventive in use, the frequency of physical inspections of the men, and the measures taken to punish those who acquire disease by neglect to make use of methods of prevention.

Replies to this letter have been received from the post surgeons in the United States, Porto Rico, Hawaii, and Alaska.

(1) Almost without exception the surgeons report that the men have been instructed in the physiology of the reproductive system and the dangers of illicit intercourse. This instruction has been given in nearly every post by the surgeon or by a medical officer in a lecture to the men one or more times a year, and in some places as often as twice a month. At a great many of the posts, perhaps the majority, leaflets or pamphlets have been printed and distributed to the men describing in plain and concise language such things as they should know in regard to this subject. At a few of the posts, magic-lantern slides have been obtained and illustrated lectures given by the surgeons. It may well be said that every enlisted man in the Army has received instruction in regard to these matters and that they

are well informed regarding the dangers of illicit sexual intercourse. It has been made clear to them also that sexual intercourse is not necessary for a healthy bodily condition, and that sexual purity is a thing that is much to be desired.

(2) No attempt has been made by the War Department or by this office until recently to prescribe what system of prophylaxis should be used for those who have not the moral stamina and self-control to observe continence. It was believed that it was better to allow the chief surgeons and post surgeons to experiment as much as they desired with all the possible different systems. Only in this way was it possible to finally form an accurate opinion of the most successful system. At 36 posts in the Eastern Division, and 18 in the Western Division the Slee prophylactic tube was used. In one post in the Eastern Division the tube was used with additional treatment at the hospital, and in one with additional toilet treatment. The Slee tube is a two-compartment tube with a 33 per cent calomel ointment in one compartment and 20 per cent argyrol or a 2 per cent protargol solution in the other.

Col. L. M. Maus, chief surgeon, Central Division, has devised a packet with a single disinfecting ointment containing calomel 25 per cent, phenol 3 per cent, camphor 3 per cent, adeps lanae 34 per cent, and adeps benzoata 35 per cent. It may be said in passing that this tube, after being given a thorough trial in the laboratory of the Surgeon General's Office, was found to be efficacious against both gonorrheal and syphilitic infections. Other ointments of similar composition, except that the base was adeps lanae, and which did not contain adeps benzoata, or the 3 per cent camphor, were found to be inefficient, apparently because the ointment was too stiff and nondiffusible. The Chief Surgeon divided the posts in the division into two classes—one which used the tube devised by him, the other the toilet method. In the toilet method a small compartment is fitted up in the lavatory of each company. In this compartment there are facilities for washing, calomel ointment 30 per cent, and silver nitrate solution 1–500. There were printed instructions in each compartment which stated that after thorough washing the silver nitrate solution should be injected into the urethra with a medicine dropper, a supply of which was also available. The calomel ointment was then to be applied externally. Another system used at a few posts was that known as the "hospital method." This method was as follows: A room was provided in the hospital with a Hospital Corps man constantly in attendance or within easy call. The men who had subjected themselves to the danger of venereal infection, upon return to the post, were directed to report at the hospital for treatment in this room by a Hospital Corps man. The treatment prescribed consisted in thorough cleansing and washing of the organs, the injection into the urethra of about 4 c. c. of an argyrol 20 per cent solution or a protargol 2 per cent solution (in some cases with the addition of 15 parts of glycerin), with directions to retain it for about three minutes. Afterwards the calomel ointment is used externally.

In some posts either the Slee tube or the Maus A. & N. tube were furnished, and in addition facilities were provided for the toilet method or for the hospital method. This double system, used by the surgeon at Fort McIntosh, Maj. W. T. Davidson, was reported by him to have been found very satisfactory.

(3) In the Department of the East and after July 1 in the Eastern Division as a whole, physical examinations were made of all enlisted men, except the married ones, twice each month by medical officers. This inspection was in accordance with a division order. As a rule the hour was known beforehand. In the Department of the Lakes, and after July 1, the Central Division, this same inspection was made twice a month in accordance with a division order. These inspections were made by a noncommissioned officer, under instruction of a medical officer.

Inspections were made at quite a few posts in the Western Division, although as far as this office has been informed, there was no division order requiring it. As pointed out in the discussion in regard to sanitation in the United States, on page 90 of this report, these inspections were found to be of very material benefit for reasons other than the detection of concealed cases of venereal disease. They make possible the detection and the proper treatment of practically all cases of venereal diseases at the posts where practiced. It is possible for some chronic cases to escape detection at these inspections but quite difficult for acute cases to do so. It was found especially desirable to have these inspections wherever systematic attempts were made at venereal prophylaxis; otherwise it would have been impossible to form any definite opinion as to the results obtained.

(4) At only a few posts were men punished by court-martial for contracting venereal diseases. At some few posts orders were issued that men who exposed themselves to the possibility of venereal infection should avail themselves of the means of prophylaxis provided, and if upon inspection they were found diseased, they were subject to court-martial and punishment, if it could be proven that they had failed to comply with the order.

It is at once apparent that the only one of the systems of prophylaxis mentioned with which it is possible to convict the men of failure to comply with the order to use prophylactic measures after subjecting themselves to the danger of infection is the hospital method. A careful record is kept of the name, rank, and organization of each man who applies for treatment, with the date. Then whenever anyone is detected with venereal diseases, if his name does not appear upon the record, he can be convicted for failure to comply with the order. This hospital method was used to best advantage at Jefferson Barracks and at Columbus Barracks.

The following table gives the rate of admission at the recruit depots for the years 1910 and 1911:

Recruit depots.	Year 1910.			Year 1911.		
	Admissions.		Mean strength.	Admissions.		Mean strength.
	Total.	Ratio.		Total.	Ratio.	
Fort Slocum, N. Y.	177	178.79	990	425	338.92	1,254
Jefferson Barracks, Mo.	319	318.36	1,002	324	263.63	1,229
Columbus Barracks, Ohio	338	317.07	1,066	312	240.93	1,295
Fort McDowell, Cal.	163	270.76	602	207	253.06	818
Fort Logan, Colo.	63	121.39	519	162	274.58	590

It will be noticed that there is a decided decrease in the rate at Jefferson Barracks and Columbus Barracks, a slight decrease in the rate at Fort McDowell, and a decided increase at Fort Slocum and Fort Logan. During the last four months of 1911 the hospital system was made compulsory by the commanding officer at Jefferson Barracks and at Columbus Barracks during the last 40 days of the year. The system was not put into effect at the three posts last named until after the end of the year. The table for the recruit depots is made up separately from the posts, for the rates at these depots are usually quite high. This is due to the fact that the garrison is made up of newly enlisted recruits and newly reenlisted men. The surgeons at Jefferson Barracks and Columbus Barracks, after a careful investigation state that over 50 per cent of the cases of venereal diseases occurring at these depots are from infections contracted prior to enlistment. The results obtained during the latter part of 1911 and the first six months of 1912 at Jefferson Barracks and Columbus Barracks have been most gratifying. A rigid system of physical inspection was prescribed, and any man detected with venereal disease whose name did not appear upon the record as having reported for disinfection was court-martialed and punished.

The following is a quotation from a report by Maj. D. C. Howard, surgeon at Jefferson Barracks, and published in the Military Surgeon in 1912:

Compulsory prophylaxis was given during a period of four months in 1911. The admission rate for 1911 (with effective prophylaxis for four months only) was reduced to 250 per 1,000. During the last four months of the year the rate was only 166 per 1,000. Over one-half of the admissions for venereal diseases at Jefferson Barracks have been due to infections contracted prior to enlistment. It is obvious that no control can be exercised over this class of admissions. Probably 80 per cent of fresh infections (new cases) can be prevented by the vigorous enforcement of this system of prophylaxis. The cases contracted at this depot during the past six months number 43 only, with a daily average enlisted strength of 1,402, giving an equivalent annual admission rate of 61 per 1,000. Twenty-eight of the fresh infections had failed to take the treatment and were reported to the adjutant for disciplinary action. Only 15 cases followed the use of 1,675 prophylactic treatments during this period (less than one infection to every 100 men exposed and treated), which indicates a degree of protection greater than 99 per cent. If every soldier had taken the treatment as required by orders during the six months' period ending March 1, 1912, it is believed that the admission rate of fresh infections for that period would not have been greater than 20 to 30 per 1,000.

From experience here it would seem possible and practicable to reduce the incidence of venereal diseases in the Army to at least one-third and perhaps one-fourth of the present rates by the general application and vigorous enforcement of this or a similar system (modified as may be necessary by local conditions) combined with the additional penalizing measure of stoppage of pay of men incapacitated on account of venereal disease for the time lost on account of such sickness.

Table showing admission rates for venereal diseases at Columbus Barracks and Jefferson Barracks for 1908, 1909, 1910, 1911, and for the first six months of 1912 (annual rate).

	1908	1909	1910	1911	First 6 months 1912, annual rate
Jefferson Barracks	243.33	262.36	318.36	263.63	131.99
Columbus Barracks	262.19	281.73	317.07	240.93	119.51

At Jefferson Barracks during these first six months of 1912 the total number of admissions for venereal disease was 90. Of this number, 38.8 per cent were from infections contracted prior to enlistment, 15.5 per cent were old cases, and only 11.1 per cent were fresh cases where the prophylactic treatments were given. There were 2,184 prophylactic treatments, of this number 10 developed venereal disease, or less than 1 to 218.

At Columbus Barracks during the same period the total number of admissions was 71. Of this number, 69 per cent were "prior to enlistment" infections, 12.7 per cent were old cases, and 12.7 per cent were fresh cases following the use of the prophylactic. There were 9 cases of infection following 1,341 prophylactic treatments, or 1 in 149.

(5) It is interesting to note to what extent the opinion prevails throughout the Army among the surgeons and post commanders that the men should be punished if they contract venereal disease and if it can be proven that they have failed to avail themselves of proper protective measures. Fifty-five surgeons in the United States expressed the opinion that men should be punished as outlined above and only two expressed an opinion contrary to this view. Forty-one post commanders were in favor of some plan and eight were opposed. It is also interesting to note that 45 surgeons expressed an opinion in favor of stoppage of pay for officers and men while sick in hospital or quarters on account of venereal diseases and none expressed an opinion opposed to this view. Twenty-seven commanding officers were also in favor of this measure and only two opposed it. It may well be said that the opinion in favor of punishment and of stoppage of pay was almost unanimous.

After a careful examination of the replies furnished to these questions it becomes evident that the majority of surgeons and commanding officers recognize that the hospital method is the one that will be found most satisfactory. There seems to be no doubt that the Slee packet or the A & N tube or the toilet method, if properly used, will prevent venereal diseases in a large percentage of cases. The difficulty is, however, that soldiers can not or will not properly use these remedies. In addition, as stated above, there is no way of proving whether they have or have not used them in case they contract venereal disease.

The following quotation from the report furnished by Col. Dodd, commanding the recruit depot at Columbus Barracks, is very interesting, showing as it does the healthy interest that is now being taken by the majority of the commanding officers in the prevention of venereal diseases:

Taken all in all, the scheme, while demanding commendable care on the part of the Medical Department and a strict enforcement of orders bearing on the subject, it is believed, has practically accomplished what for years has been hoped for rather than fully realized. With the addition of little inconvenience it is believed that the same results can be accomplished in military posts; but, in any case, absolute compulsion, with the elimination of anything bordering on persuasion or moral suasion, or depending upon voluntary action on the part of the man, but making all action in the case mandatory, will lead to a consummation most desired.

In this connection it is noted that in January there were 252 applications for prophylactic treatment reported, while during the month of February there were but 166 cases, while at the same time there was no increase in the number of cases of disease contracted. This at first was perplexing, but consideration furnished a satisfactory explanation. Each class of recruits—that is, those enlisting each day—when they

have been sworn in, and usually before they have received their uniforms, have explained to them all the points which, in the light of observation and experience, the young recruit must contend with in undergoing the process of ceasing to be a citizen and becoming a soldier. In these talks the strongest emphasis possible is placed on the evil of visiting low houses of ill fame, so prevalent here, and, above all, the disgrace of wearing the uniform in these localities. The falling off in the number of applicants for prophylactic treatment has been traced directly to this fact, the fact that things, usually unknown to new men, are explained to and understood by them. These young men, before falling into the hands of "cappers," are given to understand what is expected of them, and the gain is represented by the difference in the results of the two months—gain resulting from their following advice given them before their uniforms are donned.

It is also at this stage that orders bearing on this and kindred subjects, pointing out the little pitfalls found in the pathway of the young soldier, are fully and carefully read and explained.

Reference is made herein to the question of men wearing their uniforms in grog shops and in disreputable localities, so closely allied to the main question that a copy of an order on the subject is inclosed, marked "A." The purport and contents of this order have been, so to speak, silently carried into effect and "tried out" until there can be no question of its efficacy, especially on the subject of desertion.

Some apprehension was felt lest a too radical change, as embodied in this and the order of November 19, 1911, both of more or less stringent character, might lead to results not entirely satisfactory. The ultimate results are all that could be hoped for; but, strange to say, a great number of punishments resulting from disobedience of this order has been that of reenlisted men, many of whom have been removed from the depot on account of their pernicious activity as "cappers" and guides for younger men.

It is also shown that it has a salutary and bracing effect on the question of desertion, as shown by the following tabular statement:

Desertions during—	1909–10	Rate per thousand.	1910–11	Rate per thousand.	1911–12	Rate per thousand.
November	7	7.9	4	3.99	2	1.45
December	4	4.2	4	3.3	2	1.4
January	5	4.58	5	3.39	1	.62
February	6	5	5	3.67	2	1.29
	22	.....	18	.....	7	.....

It must be understood, however, that these highly satisfactory results are not due entirely to the order referred to, as there are other potent factors at work in this direction; but the recognized theory is, of course, that everything of this character bearing on a man's contentment affects the probability or improbability of desertion. Many cases have come to my notice wherein a man becoming diseased not only loses spirit and pride, but conceives the idea that by a change of locality his physical condition will be improved, and this inevitably leads to desertion.

The order referred to pointed out that the wearing of the uniform of the Army in places of ill-repute and in the company of disreputable companions discredited the uniform and military profession and called attention to the evil conduct of the wearer and would be considered a military offense and punished accordingly. The obligation resting upon old soldiers, and especially noncommissioned officers, to set a good example in this matter was pointed out.

The Secretary of War, in his annual report for the year 1911, made the following recommendation:

The Surgeon General recommends the stoppage of pay for time lost on account of venereal diseases as one important step to be taken. This opinion is shared by a large number of officers of general and field rank who have given the matter careful consideration. I concur with this recommendation, and I urge that legislation be passed which will authorize the stoppage of pay of both officers and men during time of disability for active service caused by such diseases.

In accordance with this recommendation a clause was embodied in the appropriation bill in the House of Representatives, as follows:

Pay of enlisted men * * * : *Provided*, (12) That no part of the appropriation in this act for the pay of officers and enlisted men shall be paid to any officer or enlisted man in active service for any period of time lost by him on account of diseases which are the result of his own intemperate use of drugs or alcoholic liquors or other misconduct.

This clause was slightly changed in the Senate, to read as follows:

Provided, (12) That any officer or enlisted man in active service who shall be absent from duty on account of disease resulting from his own intemperate use of drugs or alcoholic liquors or other misconduct shall not receive pay for the period of such absence from any part of the appropriation in this act for the pay of officers or enlisted men, the time so absent and the cause thereof to be ascertained under such procedure and regulations as may be prescribed by the Secretary of War.

The clause as passed by the Senate was agreed to in conference and passed both Houses of Congress.

This stoppage of pay will, it is believed, do as much or more than anything else that can be done to lessen the venereal rate in the Army. Until the enlisted man can be made to realize the necessity of the prevention of venereal diseases not much can be accomplished. Heretofore many of them have been apparently perfectly willing to stay in the hospital for several months with venereal diseases while their companions did the duty that they should have been doing. Some surgeons have, in fact, stated as their opinion that men have willfully contracted venereal diseases in order to escape disagreeable duties, such as practice marches, etc. It is extremely difficult to make the average man either in the Army or in civil life realize the seriousness of gonorrheal infection.

In the two last annual reports of this office the opinion has been expressed that decided and definite action on the part of the War Department was essential to any decided improvement. This view has at length prevailed, and upon the recommendation of this office the following order has been issued by the War Department:

General Orders, No. 17.

War Department, *Washington, May 31, 1912.*

1. It is enjoined upon all officers serving with troops to do their utmost to encourage healthful exercises and physical recreation and to supply opportunities for cleanly social and interesting mental occupations for the men under their command; to take advantages of favorable opportunities to point out, particularly to the younger men, the inevitable misery and disaster which follow upon intemperance and moral uncleanliness, and that venereal disease, which is almost sure to follow licentious living, is never a trivial affair. Although the chief obligation and responsibility for the instruction of soldiers in these matters rests upon company officers, the medical officers should cooperate by occasional lectures or other instruction upon the subject of sexual physiology and hygiene and the dangers of venereal infection.

2. Commanding officers will require that men who expose themselves to danger of contracting venereal disease shall at once, upon their return to camp or garrison, report to the hospital or dispensary for the application of such cleansing and prophylaxis as may be prescribed by the Surgeon General. Any soldier who fails to comply with these instructions, if found to be suffering from a venereal affection, shall be brought to trial by court-martial for neglect of duty.

3. Commanding officers will require a medical officer, accompanied by the company or detachment commander, to make a thorough physical inspection twice in each month of all enlisted men (except married men of good character) of each organization belonging to or attached to the command. These inspections will be made at times not known beforehand to the men and preferably immediately after a formation. The dates on which the physical inspections of the various organizations are made will be noted on the monthly sanitary reports.

At these examinations a careful examination of the feet and footwear and of the condition of personal cleanliness of the men will be made, as well as careful observation for the detection of venereal diseases.

Cases of the latter will be promptly subjected to treatment, but not necessarily excused from duty unless, in the opinion of the surgeon, deemed desirable. They will be made of record in the medical reports in any case. A list of those diseased but doing duty will be kept both by the company or detachment commander and the surgeon, and the infected men will be required to report to a medical officer for systematic treatment until cured. While in the infectious stages the men should be confined strictly to the limits of the post. When a venereal case, whether or not on sick report, is transferred to another command, the surgeon will send a transfer slip giving a brief history of the case.

4. All instructions from the War Department prohibiting the publication in printed or other orders of instructions prescribing examinations having in view the detection of venereal diseases among enlisted men, heretofore issued, are recalled.

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The method of cleansing and preventive prescribed by the Surgeon General was given in detail in a confidential circular.

With General Order 17 in operation and with the system of prophylaxis as outlined by the circular followed, it is confidently expected that excellent results will be obtained. If, in addition, Congress will authorize the stoppage of pay, as is apparently the intention of both Houses of Congress to do, it is believed that everything will have been done that can be done at present.

Every effort is now being made to follow up cases of venereal diseases and see that they are properly treated. A form known as the syphilitic register was authorized and published on March 16, 1911, for distribution by the Medical Department. The following are the instructions on each register:

INSTRUCTIONS.

1. This register will be kept in the case of every soldier who has syphilis. It will be begun at the first station where the diagnosis is made, and will be continued until the soldier is cured or discharged without reenlistment.

(*a*) A case is considered cured, according to present opinion, when, after a year has passed without treatment or clinical symptoms, the Wasserman reaction is negative.

2. The initial diagnosis, origin of infection, and principal lesions will be noted on page 2. Other important symptoms and memoranda worthy of remark will be noted under "Progress of case."

3. The several tests to determine the continued presence of the disease will be recorded by the dates and places thereof under "Serum reactions," indicating in the "Result" column the nature of the reactions by the symbols ++, +, +−, and−.

4. The courses and changes of treatment will be noted by successive entries in the appropriate columns under "Treatment."

5. The stations where the soldier serves during the period of observation and his movements from one to another will be recorded on the next to the last page.

6. When the soldier is sent from one station or command to another the register will be sent through the chief surgeon to the surgeon of the new station or command in time to arrive with or before the man if possible. If the register does not arrive in a reasonable time the surgeon of the new command will so inform the chief surgeon at once, so that it may be procured, and meanwhile will start a new one until the original one is received.

7. Each medical officer will initial the entries made by his direction. He will sign in the appropriate columns the prescribed record of treatments.

8. On cure or discharge without reenlistment the register will be forwarded to the Surgeon General.

If these instructions are carefully carried out it will insure the proper treatment of every case of syphilis as long as the man is in the Army or until he is cured. Before this register was issued it was extremely difficult to hold cases of this character under proper observation, especially when men were transferred from one post to another.

Maj. B. H. Dutcher, Medical Corps, Plattsburg Barracks, has made it a rule not to excuse men from duty who have uncomplicated venereal disease. Col. Hoff, who was chief surgeon of the Eastern Division, states that he believes that Maj. Dutcher's statement that he has observed that cases so treated do not become complicated more often than do those who are treated in confinement at hospital, is supported by vital statistics, not only from Maj. Dutcher's hospital, but from other posts in that division. Cases of venereal disease should be kept in hospital only when the treatment or the danger of infection demands it. A good many post commanders have issued orders that those infected should be confined to the limits of the post during the infectious stage. This is a most excellent measure.

MALARIA.

The occurrence of malarial fever, as shown by Chart M, continues to decrease. The admission rate for 1911 was 14.68 as compared with 16.36 for 1910, 23.06 for 1909, and 26.69 for 1908, which in its turn was the lowest on record in this office. This continuous improvement is to be credited not alone to the efforts of medical officers, supported by commanding officers, but also to the liberal provision of wire-gauze screens for doors and windows by the Quartermaster's Department.

Table No. 29 shows the relative incidence of the various forms of malarial infection for the past five years. Not a single death has occurred in the Army in the United States from malarial fever since 1906.

TABLE NO. 29.—*Malarial infections, United States, continental (excluding Alaska), year 1911.*

[Ratio per 1,000 of mean strength.]

Malarial fevers.	Admitted.			Discharged on certificate of disability.			Died.			Noneffective.		
	Total.	White.	Colored.	Total.	White.	Colored.	Total.	White.	Colored.	Total.	White.	Colored.
Quartan and tertian:												
1911	13.63	14.36	0.68	.....	.....	.....	.....	.....	.....	0.29	0.30	0.01
1910	14.57	15.18	3.68	.....	.....	.....	.....	.....	.....	.28	.29	.06
1909	20.29	20.74	7.65	.....	.....	.....	.....	.....	.....	.41	.42	.13
1908	24.12	24.33	11.05	.....	.....	.....	.....	.....	.....	.49	.49	.14
1907	28.44	29.28	.96	.....	.....	.....	.....	.....	.....	.53	.54	.02
Estivo-autumnal:												
1911	.89	.94	.....	.....	.....	.....	.....	.....	.....	.04	.04	.....
1910	1.36	1.39	1.00	.....	.....	.....	.....	.....	.....	.05	.05	.03
1909	1.96	1.99	1.02	.....	.....	.....	.....	.....	.....	.07	.07	.03
1908	2.09	2.11	1.38	.....	.....	.....	.....	.....	.....	.08	.08	.04
1907	1.51	1.55	.....	.....	.....	.....	.....	.....	.....	.08	.08	.....
Malarial cachexia and undetermined malarial infections:												
1911	.16	.17	.....	.....	.....	.....	.....	.....	.....	.02	.02	.....
1910	.43	.46	.....	.....	.....	.....	.....	.....	.....	.03	.03	.....
1909	.80	.83	.....	0.02	0.02	.....	.....	.....	.....	.04	.04	.....
1908	.47	.48	.....	.....	.....	.....	.....	.....	.....	.01	.01	.....
1907	.26	.26	.....	.....	.....	.....	.....	.....	.....	.02	.02	.....
Total malarial diseases:												
1911	14.68	15.47	.68	.....	.....	.....	.....	.....	.....	.35	.36	.01
1910	16.36	17.02	4.69	.....	.....	.....	.....	.....	.....	.36	.37	.09
1909	23.06	23.57	8.67	.02	.02	.....	.....	.....	.....	.51	.53	.16
1908	26.69	26.91	12.43	.....	.....	.....	.....	.....	.....	.58	.59	.18
1907	30.20	31.09	.96	.....	.....	.....	.....	.....	.....	.63	.65	.02

CHART M.—*Showing (for the United States proper) the relative admission and non-effective ratios per thousand of mean strength for the decade 1902–1911 for malarial fevers.*

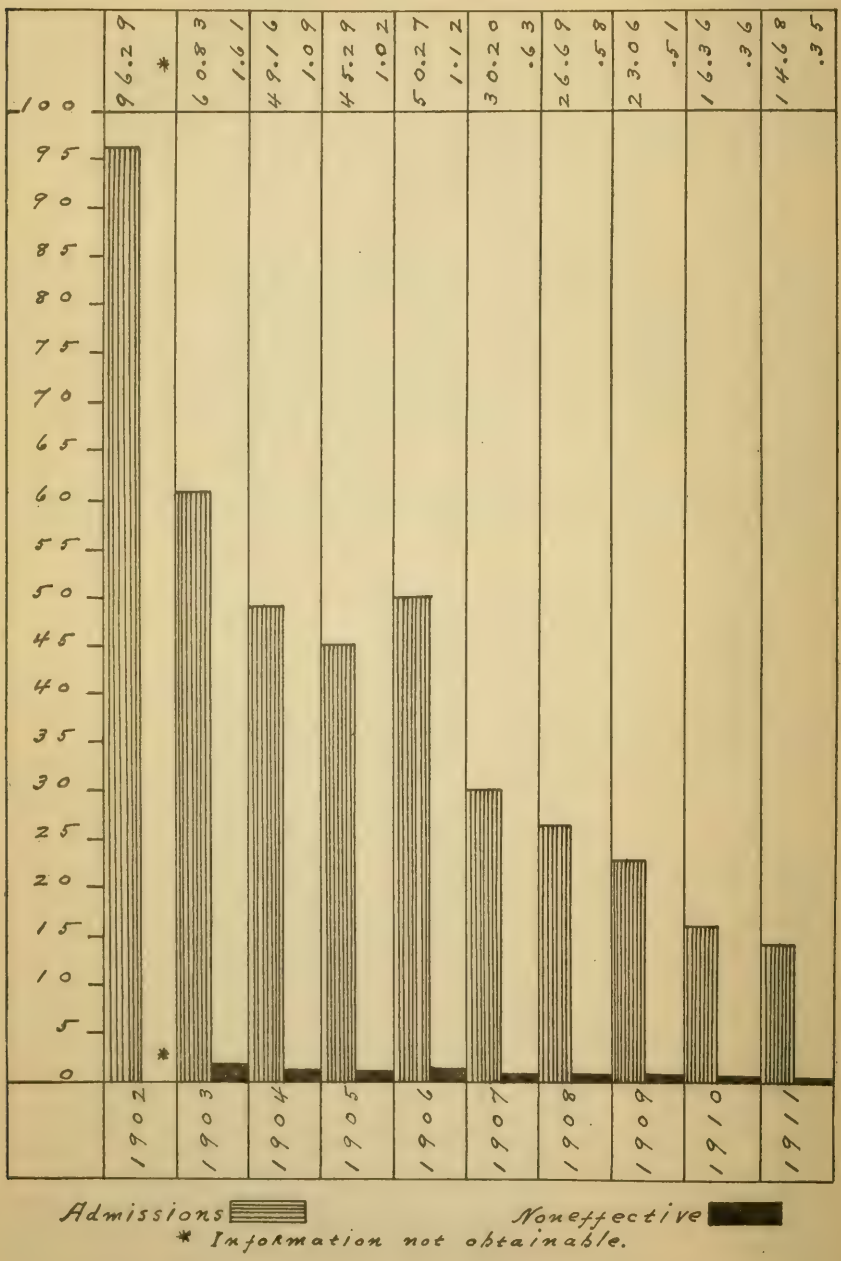


TABLE NO. 30.—*The 10 posts in the United States having the highest admission rates for malarial diseases, 1911.*

[Ratio per 1,000 of mean strength.]

Post.	Mean strength.		Malarial diseases, total ratio.	
	1911	1910	1911	1910
Fort Washington, Md.	420	531	333.33	237.29
Washington Barracks, D. C.	658	568	185.41	14.08
Fort Apache, Ariz.	116	128	103.45	.....
Fort Hunt, Va.	110	119	90.91	92.44
Fort Logan H. Roots, Ark.	279	255	60.93	54.90
Fort Howard, Md.	406	456	56.65	28.51
Fort Mott, N. J.	201	221	44.78	.....
Fort Caswell, N. C.	323	342	37.15	32.16
Boise Barracks, Idaho.	136	128	36.76	109.37
Fort Rodman, Mass.	146	117	34.25	.....
Total United States, continental (excluding Alaska)	55,240	55,680	14.68	16.36

Fort Washington this year, as for the last several years, has the unenviable reputation of having the highest admission rate for any post in the United States. The rate in 1911 was 333.33 per 1,000, as compared with 237.29 for 1910, 215.77 for 1909, 144.30 for 1908, 363.64 for 1907, and 736 for 1906. The rate in 1910 was higher than any post in the Philippine Islands except Camp Stotsenburg. In 1911 it was higher than that for any post in the Philippine Islands.

Mention was made last year of the report of the board composed of Lieut. Col. J. R. Kean, Medical Corps, Maj. F. F. Russell, Medical Corps, and Capt. Robert Kelton, Coast Artillery Corps, post quartermaster. This board recommended (1) the purchase, at estimated cost of $5,000, of 27 acres, including the marsh adjoining Swan Creek, in order to control the drainage of that area; (2) the clearing of a zone 125 yards wide immediately behind the line of barracks, quarters, etc., of all growth over 1 foot high; (3) the drainage to the river of all storm water, so that there should be no erosion or accumulations in pockets in ravines; (4) the daily indoor search for and killing of all mosquitoes; (5) the screening of all doors and windows in habitations; (6) the systematic oiling of all pools of water; (7) the placing of names of all infected individuals on a roster, with treatment for four months; (8) quinine prophylaxis temporarily; (9) an allotment for labor for clearing and drainage.

Col. William Stephenson, sanitary inspector, Eastern Division, in a report in January, 1912, says:

> The measures recommended by this board were begun in July and were well under way about September 15, but in spite of what appears to be diligent prosecution, were too late to affect the admission rate for 1911. This late start was due to the absence of three companies and the permanent post commander in Texas, and delay in obtaining departmental authority to substitute clearing of land for some of the outdoor instruction of the troops. Since December 1, when the indoor schedule of instruction took effect, clearing work has been kept up by prisoners to some extent.

On November 16, 1911, Lieut. T. W. Jackson, Medical Reserve Corps, reported for duty at this post, was appointed sanitary inspector, and placed directly in charge of the malarial situation with orders to report to the commanding officer. Lieut. Jackson, as sanitary inspector, has made good progress considering the resources available. An examination of the blood of each member of the garrison was made. He located eight soldiers with aestivo-autumnal infections.

Recommendations were made for the transfer of these cases to some nonmalarious posts.

The office of the Quartermaster General allotted $500 for use in the work. The commanding officer, Col. H. C. Davis, Coast Artillery Corps, who has been unremitting in his efforts to improve conditions, reported that—

> The $500 is being used to advantage largely in purchase of material for treatment of ravines. It will enable me to make a good start. Much clearing has been done by troops, and this will continue to a limited extent through the winter. Next spring I shall make a report and will probably be able by that time to show results.

Col. Stephenson, sanitary inspector, says:

> The post is surrounded by miles of dense brush and timber; the mosquitoes are infected from the surrounding inhabitants as well as the troops which have been there so many years, and while improvement in the condition should appear this summer without much more clearing and drainage (which requires labor, hired or by troops), the antimalarial campaign is likely to require several years for completion.

If this post is to be occupied, it is certainly time for this situation to be taken well in hand and remedied. Sufficient money should be appropriated to carry out the recommendations of the board at once.

Washington Barracks, D. C., is second to Fort Washington, with an admission rate of 185.41 per 1,000. In 1910 the rate for this post was 14.08. The surgeon attributed the high rate in 1911 to the command being infected while in camp at Fort Foote, Md.

The high rate at Fort Apache, Ariz., is without doubt due to the change of garrison early in the year when it was garrisoned by troops just returned from the Philippine Islands.

There was, however, no change of garrison to account for the abnormally high rate at Fort Mott and Fort Rodman. There were nine cases at Fort Mott and five at Fort Rodman. These cases at Fort Mott probably occurred in men infected elsewhere and assigned there to duty.

The cases at Fort Rodman occurred among troops on temporary duty there for artillery practice. One case each was in an organization from Fort Hunt and from Fort Dupont and three from Fort Washington. No cases occurred at Fort Mott or Fort Rodman in 1910.

UNDETERMINED FEVERS.

The admission rate for these fevers for the United States was 2.50, as compared with 2.42 for 1910, 2.15 for 1909, 3.80 for 1908, and 4.67 for 1907. It will be noted that the rates for these fevers are higher this year than last for Alaska and Hawaii, but lower for the transports and the Philippine Islands. The total rate was 3.37 for 1911, as compared with 3.89 for 1910. The different diagnoses included under this heading and the number of admissions are given in the following table:

TABLE No. 31.—*Undetermined fevers, 1911, American troops, by countries—enlisted men.*

Diseases.	United States.	Alaska.	Hawaii.	Philippine Islands.	Canal Zone, Panama.	Transports.	Total.
Febricula	39	1	5	47	.....	.....	92
Fever, simple continued	7	.....	1	23	.....	.....	31
Fever, type undetermined	80	.....	3	12	11	2	108
Ephemeral fever	9	.....	.....	2	.....	.....	11
Thermic fever	3	.....	.....	.....	.....	.....	3
Total	138	1	9	84	11	2	245
Ratio per 1,000 of mean strength	2.50	0.89	4.47	6.74	53.92	1.18	3.37

TUBERCULOSIS.

The admission rate for tuberculosis (all) for 1911 was 3.89 per 1,000 for the United States, with a death rate of 0.52 as compared with an admission and death rate of 3.52 and 0.25, respectively, for 1910, and with 4.74 and 0.65 for 1909. The discharge rate was 2.85 as compared with 4.01 for 1910, 2.10 for 1909, and 2.77 for 1908 and 3.93 for 1907. Table No. 32 shows the posts having more than one case for 1911, and also those for 1910, for purpose of comparison.

TABLE NO. 32.—*Tuberculosis (all) at Army stations, United States, continental (excluding Alaska), year 1911 compared with 1910—enlisted men.*

	Admissions, year 1911.		Admissions, year 1910.	
	Number.	Ratio per 1,000 of mean strength.	Number.	Ratio per 1,000 of mean strength.
Vancouver Barracks, Wash	22	21.96	9	7.98
Letterman General Hospital, San Francisco, Cal	11	41.20	9	31.47
Presidio of San Francisco, Cal	11	5.60	13	5.42
General Hospital, Fort Bayard, N. Mex	8	64.00	7	56.91
Fort D. A. Russell, Wyo	7	4.29	8	3.48
Columbus Barracks, Ohio	6	4.72	5	4.80
Fort McDowell, Cal	6	7.52	1	1.72
Fort Hamilton, N. Y	5	11.06	2	3.82
Fort Sam Houston, Tex	5	3.10	4	2.51
Fort Baker, Cal	4	10.84	5	11.79
Madison Barracks, N. Y	4	8.06		
Fort Adams, R. I	3	5.43	1	1.61
Fort Barrancas, Fla	3	6.45	2	3.48
Fort Du Pont, Del	3	7.21	3	5.70
Fort Ethan Allen, Vt	3	3.88	1	1.43
Fort George Wright, Wash	3	6.40	1	2.42
Fort Lincoln, N. Dak	3	11.67	3	15.63
Fort Logan, Colo	3	5.24		
Fort Mackenzie, Wyo	3	8.77	1	2.08
Fort McIntosh, Tex	3	9.49		
Fort Oglethorpe, Ga	3	9.84	2	2.99
Fort Slocum, N. Y	3	2.44	7	7.24
Fort Totten, N. Y	3	4.72	1	1.38
Walter Reed General Hospital, Takoma Park, D. C	3	21.43	1	7.81
Jefferson Barracks, Mo	2	1.66	5	5.10
Fort Leavenworth, Kans	2	1.63	3	1.55
Fort Myer, Va	2	3.07	4	4.97
Fort Porter, N. Y	2	8.73	3	12.15
Fort Benjamin Harrison, Ind	1	5.59	6	7.70
Fort Monroe, Va	1	.93	5	4.09
Fort Robinson, Nebr	1	2.15	4	8.68
Fort Snelling, Minn	1	2.17	4	3.99
Alcatraz Island, Cal			3	18.63
Boise Barracks, Idaho			3	25.42
Fort Des Moines, Iowa			3	4.95
Fort Thomas, Ky			3	6.40
Washington Barracks, D. C			3	5.58
14 posts, not included above, had 2 cases each in 1911	28			
16 posts, not included above, had 2 cases each in 1910			32	
17 posts, not included above, had 1 case each in 1911	17			
19 posts, not included above, had 1 case each in 1910			19	
Maneuver camps, field, etc., 1911	30			
Camps of instruction, field, etc., 1910			10	
Total	215	3.89	196	3.52

The above table, taken in connection with a study of its occurrence in organizations, apparently shows clearly that the prevalence of tuberculosis in a post as well as in a company one year does not to a marked extent influence its occurrence in the following year.

Of the 122 men who were treated for tuberculosis during the year, 86 or 74 per cent, were below the standard proportion of weight to height, while 12, or 18 per cent, were below the minimum allowed for each height. The attitude of this office is that certainly no man should be accepted for first enlistment or for commission whose weight is below the minimum standard required for his height. If this rule

were strictly adhered to, fewer cases of pulmonary tuberculosis would occur in the service.

Prior to August 1, 1910, commanding officers of military posts or stations, upon the receipt of a certificate from the senior medical officer of a post or station that a soldier was a proper subject for treatment at the general hospital, Fort Bayard, were authorized to send suitable cases there for treatment. General Order No. 151, War Department, August 1, 1910, however, directed that the papers in all cases of pulmonary tuberculosis be sent to the War Department for action. This order was found to cause too great a delay in transferring cases there. In accordance with a recommendation from this office, this requirement was amended April 12, 1912. Division commanders are now authorized to send suitable cases to Fort Bayard. It is, however, stipulated that—

No enlisted man will be recommended for transfer to Fort Bayard unless he is willing if discharged to remain at that hospital for treatment as a beneficiary of the Soldiers' Home for a period of three months from admission thereto. Soldiers suffering from pulmonary tuberculosis who do not desire treatment at the hopital will be recommended for discharge on certificates of disability.

Table No. 33 shows the movement of cases and also the distribution of this disease by countries.

TABLE NO. 33.—*Occurrence of tuberculosis (all) among American troops, Army, year 1911, by years, of service—enlisted men.*

	During first year of service.	During second year of service.	During third year of service.	During fourth year of service.	During fifth year of service.	During sixth year of service and over.	Total.
United States, continental (excluding Alaska):							
Mean strength	10,204	6,589	11,852	6,043	3,518	17,034	55,241
Admitted	47	17	33	28	11	65	200
Ratio per 1,000 of mean strength	4.61	2.58	2.78	4.63	3.13	3.82	3.64
Duty	5	1	5	3	1	7	22
Died	5		2	3	1	13	24
Discharged on certificate of disability	26	12	20	10	3	18	89
Otherwise	2	1	2		1	1	7
Remaining Dec. 31, 1911	9	3	4	12	5	26	59
Philippines:							
Mean strength	2,267	1,349	2,672	974	675	4,517	12,454
Admitted	15	5	6	2		19	47
Ratio per 1,000 of mean strength	6.62	3.71	2.25	2.05		4.21	3.77
Duty				1		3	4
Died			1				1
Discharged on certificate of disability	9	4	4			5	22
Remaining Dec. 31, 1911	6	1	1	1		11	20
Alaska:							
Mean strength	64	66	213	134	91	551	1,119
Admitted						3	3
Ratio per 1,000 of mean strength						5.44	2.68
Died						1	1
Discharged on certificate of disability						1	1
Remaining Dec. 31, 1911						1	1
Hawaii:							
Mean strength	474	352	428	127	103	530	2,014
Admitted	3	1					4
Ratio per 1,000 of mean strength	6.33	2.84					1.99
Discharged on certificate of disability	2	1					3
Remaining Dec. 31, 1911	1						1
Transports:							
Mean strength	569	181	145	199	91	515	1,700
Admitted	3						3
Ratio per 1,000 of mean strength	5.27						1.76
Died	1						1
Discharged on certificate of disability	2						2
Total Army:							
Mean strength	13,659	8,547	15,338	7,495	4,496	23,213	72,748
Admitted [1]	68	23	39	30	11	87	258
Ratio per 1,000 of mean strength	4.98	2.69	2.54	4.00	2.45	3.75	3.55
Duty	5	1	5	4	1	10	26
Died	6		3	3	1	14	27
Discharged on certificate of disability	39	17	24	10	3	24	117
Otherwise	2	1	2		1	1	7
Remaining Dec. 31, 1911	16	4	5	13	5	38	81

[1] Of the 272 cases admitted in 1911, 14 were returned to duty and readmitted, leaving 258 individuals to be accounted for, giving a ratio of 3.55 per 1,000 of mean strength.

CHART N.—*Showing (for the Army) the relative admission and death ratios per thousand of mean strength for tuberculosis, by years, since 1897.*

CEREBROSPINAL MENINGITIS.

Two cases of this disease occurred during the year with two deaths. In 1910 there were four cases with three deaths, in 1909 and 1908 there were 13 cases each with 7 deaths, and in 1907 there were 33 cases with 30 deaths. The two cases occurred at Fort Robinson, Nebr., in May.

During the early part of 1912 there was quite an extensive epidemic of this disease in the State of Texas. It was considered advisable during the height of the epidemic to discontinue recruiting at the infected points. No case occurred during the epidemic at any post in Texas.

INSANITY.

The admission rate for insanity for the United States was 1.68 per 1,000 as compared with 1.58 for 1910, 1.63 for 1909, 1.58 for 1908, and 1.79 for 1907. The noneffective rate was 0.46 per 1,000, as compared with 0.32 for 1910, 0.29 for 1909, and 0.31 for 1908.

ALCOHOLISM IN THE UNITED STATES.

The admission rate for alcoholism in the United States for the year 1911 was 20.31, which is quite a material improvement over the preceding year, when it was 23.51. It is gratifying to observe that this rate has shown a steady diminution since 1907, following an equally steady rise for eight years before 1907. It is interesting to note that the rate for 1911 is the lowest for any year since 1870, except for the years 1898 and 1899, when the rates were approximately 16 and 18 per 1,000. As these were years of war, when such rates are usually lower, they can hardly be taken as a basis of comparison. These rates do not represent the amount of intemperance existing in the Army, but as they are all calculated from similar data, that is, the number of cases in which medical assistance was invoked to avert danger, they are useful as an index of alcoholic excess.

SMALLPOX.

Only 4 cases of smallpox occurred during the year. There was no death. These cases occurred, 1 at Fort Logan, Colo., in January; 1 in the camp near Fort Bliss, Tex., in May; 1 at Fort McDowell, Cal., in October; and 1 at Vancouver Barracks, Wash., in December.

DIPHTHERIA.

During the year 43 cases occurred. There was no death and 1 discharge resulting. Twelve of these cases were at Fort Mackenzie (Jan. 7, Mar. 1, Oct. 2, and Dec. 2), 10 at Fort Sam Houston (December); 4 at Leavenworth (November); 4 at Jefferson Barracks (June, August, September, and December); 2 at Madison Barracks (October and November), and 2 at Plattsburg Barracks in December. The other cases each occurred at separate posts.

MEASLES.

During the year 1911, 1,101 cases of measles occurred in the United States, with 25 deaths. Three hundred and ninety-two of these cases, with 18 of the deaths, occurred at Columbus Barracks.

Attention was invited in the last annual report to the severe epidemic of measles prevailing there during the early part of the year 1911. There was an extract published in that report from the report furnished by Capt. A. C. Christie, Medical Corps, for the cases which occurred in the latter part of 1910 and the first part of 1911. At the time of his report 202 cases had occurred, with 16 deaths. This epidemic continued throughout 1911, and was still in progress at the end of May, 1912. An excellent report of this entire epidemic has been furnished by Capt. E. D. Kilbourne, Medical Corps, which covers all cases during the epidemic, including those reported on by Capt. Christie, and counting all up to May 30 of the present year. The epidemic had continued in all 79 weeks; 600 cases had occurred, with 30 deaths, or a mortality of 5 per cent. Of these cases 7 were incurred in 1910, 392 in 1911, and 201 up to May 31, 1912.

Capt. Kilbourne states that—

A large recruit population during the cold months was due to the winter influx of recruits and to military necessity, which prevented as large a reduction of recruit strength as was desired by the sanitary officers of the post. Overcrowding was certainly a factor in the spreading and severity of the disease. The crowding was especially pernicious, occurring as it did in the cold weather, when proper ventilation is most difficult, and the men of necessity spend more time indoors. The barracks allow a minimum of 720 cubic feet of air per man, except during periods of greatest crowding, when an allowance of less than 600 cubic feet was possible. Frequent inspections were made to see that the ventilation was adequate, and the men were required to remain outside for several hours each day during which time the quarters were thoroughly aired.

A chart was prepared, however, by Capt. Kilbourne, showing that the relative incidence followed in general the curve of recruit strength; that is, that the more crowded the barracks, the greater the proportion of recruits becoming infected.

Measles vary extremely in severity, being at times very mild and at other times more severe. About the middle of February, 1911, as reported by Capt. Christie, the disease suddenly became very virulent. The complications were numerous and fatal. Again in February, 1912, the same increased virulence occurred. Of 16 cases admitted from February 16 to February 22, 1912, all were severe and only two escaped complications. Among the 16 cases 3 deaths occurred, 2 from broncho-pneumonia and 1 from acute lepto-meningitis. Besides overcrowding, the writer is of the opinion that meteorological conditions are large factors in these changes. During cold, damp, and blustery weather the cases are more severe and even individuals would be worse on stormy days. Almost without exception the case was isolated at the first appearance of the Koplik spots, and from one to five days before the eruption. Many were isolated before any spots were present in the mouth, the only symptoms being coryza, cough, and conjunctivitis. Undoubtedly measles are contagious several days before the appearance of Koplik spots. In no case were Koplik spots absent. They were of great value in distinguishing the true measles from German measles, which disease existed during part of the epidemic.

Complications and intercurrent diseases.

Otitis media, catarrhal and suppurative	74	Empyema	6
Mastoiditis, acute	11	Broncho-pneumonia	47
Frontal sinusitis	10	Lobar pneumonia	4
Maxillary sinusitis	2	Pulmonary tuberculosis	3
Bronchitis, acute, severe	12	Milliary tuberculosis	1
Laryngitis, acute, severe	89	Meningitis	3
Sero-fibrinous pleurisy	8	Peritonitis	1
Fibrinous pleurisy	18	Appendicitis	2
		Others	80

In all, 37 complications or intercurrent diseases occurred. Severe laryngitis occurred in 14.8 per cent of the cases; otitis media, catarrhal and suppurative, 12.16 per cent; acute mastoiditis, 1.8 per cent; broncho-pneumonia, 7.8 per cent; and pleurisy and empyema, 10.63 per cent. Twenty-five of the deaths were in cases complicated with broncho-pneumonia, and as this complication occurred in 47 cases, this gave the case mortality of 53 per cent of all cases so complicated.

We did not hesitate to let the cases out of quarantine after the disappearance of catarrhal symptoms, and in no case could we trace transmission of the disease from such convalescence. In accordance with recent views on the unimportance of formites in the spread of measles, no disinfection of barracks was attempted in this epidemic. We are more than ever convinced that the spread of the disease is by direct contact very early in catarrhal stage before its recognition is possible.

An inspector general reported in March of this year that the barracks were very much overcrowded, and that in view of the alarming epidemic of measles then prevailing recommended that immediate steps be taken to reduce the size of the garrison. The Secretary of War, acting upon this recommendation, directed a large reduction of the number of recruits at Columbus Barracks immediately. Detachments of immune recruits were sent to the various posts throughout the country, and the number of incoming recruits was reduced by sending them to other depots. In a short time in this way the garrison was materially reduced in size, and as a result the surgeon was soon able to get the measles epidemic under control. He has not, however, as yet been able to entirely eradicate it. The evil effect of this continued epidemic has not only been felt at Columbus Barracks, but throughout the Army. Numbers of recruits that were transferred to other posts have, after their arrival, developed measles and infected other men at the new station. Epidemics have been started on Pacific transports in the same way. It is very clearly a necessity that posts of the character of Columbus Barracks, situated in the heart of a city, where contagious diseases are apt to occur at any time, should not be overcrowded. Frequent epidemics of various infectious diseases have occurred at Columbus Barracks, especially during periods of overcrowding, in the past and will continue to do so in the future if the garrison is not kept within its proper limits.

INFLUENCE OF STATION.

The posts having the highest noneffective rate this year are Fort Bliss, Tex.; Fort Sam Houston, Tex.; and Fort Screven, Ga., in the order named, the rates being, respectively, 75.96 per 1,000, 70.27 per 1,000, and 40.76 per 1,000. The high noneffective rate at Fort Bliss and Fort Sam Houston, as explained in the footnote in table No. 33, is partially to be attributed to cases received by transfer from the maneuver division and from the troops in the field in Texas. It will be noticed, however, by referring to the column for the average number of days lost for each case, that Fort Bliss and Fort Sam Houston have the unenviable reputation of standing first and second, respectively, with rates of 36.30 and 29.00. In other words, each case admitted to hospital at Fort Bliss remained on sick report for an average of 36.3 days.

The posts having the highest admission rate for the year are Fort Washington, Md.; Jackson Barracks, La.; and Fort Mott, N. J., in

the order named. As is stated repeatedly in this report, however, the noneffective rate is the true measure of the effect of sick report upon military efficiency. The noneffective rate at these three posts having the highest admission rate was much lower than the three posts mentioned with the highest noneffective rates, and also lower than several others not mentioned. The average number of days treatment for each case at Fort Washington was 8.62, at Jackson Barracks 11.06, and Fort Mott 5.05.

The five posts having the lowest noneffective rates for this year are all Coast Artillery posts, except the second—Fort Ontario, N. Y. The first three of these posts are Fort Warren, Mass; Fort Ontario, N. Y.; and Fort Greble, R. I., with noneffective rates, respectively, of 7.50, 9.10, and 9.49. The average number of days treatment for each case at these posts was, respectively, 11.88, 10.95, and 9.80.

The three posts having the lowest admission rates were Fort Warren, Fort Ontario, and Fort Worden, Wash., with rates, respectively, of 230.41, 350.71, and 352.48. The noneffective rates for Fort Warren and Fort Ontario are given in the last paragraph; that for Fort Worden was 15.67, and the average number of days for each case at that post was 16.22.

Of the recruiting depots, Fort Slocum, N. Y., had the highest noneffective rate, 56.64, and Fort McDowell, Cal., the lowest, 33.96. Jefferson Barracks, Mo., had the highest average number of days treatment for each case, 14.40, and Columbus Barracks, Ohio, the lowest, 8.85. Fort Slocum also had the highest admission rate, 2,164.28, and Jefferson Barracks the lowest, 1,140.77. The highest death rate occurred at Columbus Barracks, 18.53 per 1,000, and the lowest Fort Logan, 1.69.

The Western Division had the lowest noneffective rate, this being 20.27 per 1,000, as compared with 20.71 for the Eastern and 34.44 for the Central. The Eastern Division had the lowest admission rate, being 722.29 per 1,000 as compared with 798.63 for the Central and 859.45 for the Western. The Eastern Division also had the lowest death rate, this being 3.41 per 1,000, as compared with 3.82 for the Western Division and 5.47 for the Central. The Western Division had the lowest average number of days treatment for each case, this being 8.61 days, as compared with 10.47 for the Eastern Division and 15.74 for the Central.

The following tables, Nos. 34 and 35, show the posts having the highest and lowest ratios for admission and noneffectiveness in the United States as a whole:

TABLE NO. 34.—*Posts having the highest admission and noneffective rates, year 1911.*

	Mean strength.	Ratio per 1,000 of mean strength.										Average number of days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective rates.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
										From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.					
		From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
POSTS IN ORDER OF HIGHEST ADMISSION RATES FROM ALL CAUSES.																	
Fort Washington, Md	420	1,438.10	938.10							33.97	25.66	21.75	16.10	12.40	8.62	7.94	8.46
Jackson Barracks, La	227	1,132.16	898.68	4.57	4.57	8.81		13.38	4.57	34.31	33.35	21.29	20.33	12.52	11.06	7.77	8.65
Fort Mott, N. J	201	1,114.43	661.69							22.31	21.36	8.97	8.66	8.14	5.05	3.27	4.95
Presidio of San Francisco, Cal. (Post of)	2,028	1,076.44	659.27			.99	0.49	.99	.49	5.44	(1)	2.98	(1)	1.99	1.85	1.09	1.65
Fort Screven, Ga	398	1,065.32	633.17			2.51		2.51		40.76	36.33	20.09	17.53	14.88	13.96	7.33	11.58
POSTS IN ORDER OF HIGHEST ADMISSION RATES, EXCLUDING VENEREAL DISEASES, INJURIES, ETC.																	
Fort Washington, Md	420	1,438.10	938.10							33.97	25.66	21.75	16.10	12.40	8.62	7.94	8.46
Jackson Barracks, La	227	1,132.16	898.68	4.57	4.57	8.81		13.38	4.57	34.31	33.35	21.29	20.33	12.52	11.06	7.77	8.65
Fort Baker, Cal	378	1,037.04	682.54			2.65		2.65		16.30	12.55	10.23	8.58	5.95	5.74	3.73	5.47
Fort Logan H. Roots, Ark	279	1,021.51	673.84	3.79	3.79	7.17	7.17	10.96	10.96	34.60	29.45	19.25	16.51	12.63	12.36	7.03	10.43
Fort Mott, N. J	201	1,114.43	661.69							22.31	21.36	8.97	8.66	8.14	5.05	3.27	4.95

POSTS IN ORDER OF HIGHEST NONEFFECTIVE RATES FROM ALL CAUSES.																
Fort Bliss, Tex.[2]	381	763.78	467.19	.....	.....	15.75	2.62	15.75	2.62	75.96	71.78	27.21	25.34	27.73	36.30	9.93	21.26
Fort Sam Houston, Tex.[2]	1,687	884.41	439.24	44.04	35.98	13.04	9.48	57.08	45.46	70.27	68.00	40.37	39.34	25.65	29.00	14.73	33.55
Fort Screven, Ga	398	1,065.32	633.17	.....	.....	2.51	.....	2.51	.....	40.76	36.33	20.09	17.53	14.88	13.96	7.33	11.58
Fort Snelling, Minn	484	892.57	404.96	.....	.....	.....	.....	.....	.....	38.69	34.90	16.60	14.54	14.12	15.82	6.06	14.96
Fort D. A. Russell, Wyo	1,713	1,047.87	600.12	.....	.....	5.84	1.17	5.84	1.17	36.06	35.13	18.80	18.11	13.16	12.56	6.86	11.43
POSTS IN ORDER OF HIGHEST NONEFFECTIVE RATES, EXCLUDING VENEREAL DISEASES, INJURIES, ETC.																	
Fort Sam Houston, Tex	1,687	884.41	439.24	44.04	35.98	13.04	9.48	57.08	45.46	70.27	68.00	40.37	39.34	25.65	29.00	14.73	33.55
Fort Bliss, Tex	381	763.78	467.19	.....	.....	15.75	2.62	15.75	2.62	75.96	71.78	27.21	25.34	27.73	36.30	9.93	21.26
Fort Washington, Md	420	1,438.10	938.10	.....	.....	.....	.....	.....	.....	33.97	25.66	21.75	16.10	12.40	8.62	7.94	8.46
Jackson Barracks, La	227	1,132.16	898.68	4.57	4.57	8.81	.....	13.38	4.57	34.31	33.35	21.29	20.33	12.52	11.06	7.77	8.65
Fort William H. Harrison, Mont	302	970.20	569.54	.....	.....	6.62	3.31	6.62	3.31	35.86	30.70	20.83	18.02	13.09	13.49	7.60	13.35

[1] No hospital; the sick are treated in the general hospital.
[2] The high noneffective rates for Fort Bliss and Sam Houston can be attributed to cases received by transfer from the Maneuver Division.

TABLE No. 35.—*Posts having the lowest admission and noneffective rates, year 1911.*

	Mean strength.	Ratio per 1,000 of mean strength.												Average number of days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective rates.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
										From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.					
		From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
POSTS IN ORDER OF LOWEST ADMISSION RATES FROM ALL CAUSES.																	
Fort Warren, Mass	217	230.41	138.25	.....	.....	4.61	4.61	4.61	4.61	7.50	7.42	4.43	4.41	2.74	11.88	1.62	11.70
Fort Ontario, N. Y	211	350.71	236.97	.....	.....	4.74	.....	4.74	.....	9.10	8.02	6.04	5.32	3.32	10.95	2.20	7.27
Fort Worden, Wash	644	352.48	204.97	.....	.....	1.55	.....	1.55	.....	15.67	14.83	7.28	6.82	5.72	16.22	2.66	12.97
Fort Greble, R. I	314	353.50	235.67	.....	.....	9.55	6.37	9.55	6.37	9.49	8.98	6.07	5.60	3.46	9.80	2.22	9.40
Fort Rosecrans, Cal	208	480.77	322.12	.....	.....	14.42	4.81	14.42	4.81	17.15	16.31	12.71	12.01	6.26	13.02	4.64	14.40
POSTS IN ORDER OF LOWEST ADMISSION RATES, EXCLUDING INJURIES, ETC.																	
Fort Warren, Mass	217	230.41	138.25	.....	.....	4.61	4.61	4.61	4.61	7.50	7.42	4.43	4.41	2.74	11.88	1.62	11.70
Fort Worden, Wash	644	352.48	204.97	.....	.....	1.55	.....	1.55	.....	15.67	14.83	7.28	6.82	5.72	16.22	2.66	12.97
Fort McKinley, Me	655	537.40	219.85	1.56	1.56	4.58	3.05	6.14	4.61	10.82	10.19	4.52	4.29	3.95	7.35	1.65	7.50
Fort Greble, R. I	314	353.50	235.67	.....	.....	9.55	6.37	9.55	6.37	9.49	8.98	6.07	5.60	3.46	9.80	2.22	9.40
Fort Ontario, N. Y	211	350.71	236.97	.....	.....	4.74	.....	4.74	.....	9.10	8.02	6.04	5.32	3.32	10.95	2.20	7.27

POSTS IN ORDER OF LOWEST NONEFFECTIVE RATES FROM ALL CAUSES.																
Fort Warren, Mass	217	230.41	138.25	.....	.....	4.61	4.61	4.61	4.61	7.50	7.42	4.43	4.41	2.74	11.88	1.62	11.70
Fort Ontario, N. Y	211	350.71	236.97	.....	.....	4.74	.....	4.74	.....	9.10	8.02	6.04	5.32	3.32	10.95	2.20	7.27
Fort Greble, R. I	314	353.50	235.67	.....	.....	9.55	6.37	9.55	6.37	9.49	8.98	6.07	5.60	3.46	9.80	2.22	9.40
Fort McKinley, Me	655	537.40	219.85	1.56	1.56	4.58	3.05	6.14	4.61	10.82	10.19	4.52	4.29	3.95	7.35	1.65	7.50
Fort Terry, N. Y	559	805.01	588.55	1.84	1.84	1.79	.....	3.63	1.84	13.18	11.50	7.83	6.56	4.81	5.98	2.86	4.86
POSTS IN ORDER OF LOWEST NONEFFECTIVE RATES EXCLUDING INJURIES, ETC.																
Fort Warren, Mass	217	230.41	138.25	.....	.....	4.61	4.61	4.61	4.61	7.50	7.42	4.43	4.41	2.74	11.88	1.62	11.70
Fort McKinley, Me	655	537.40	219.85	1.56	1.56	4.58	3.05	6.14	4.61	10.82	10.19	4.52	4.29	3.95	7.35	1.65	7.50
Fort Williams, Me	533	594.75	328.33	1.93	1.93	.....	.....	1.93	1.93	16.12	14.26	5.92	5.47	5.88	9.89	2.16	6.58
Fort Ontario, N. Y	211	350.71	236.97	.....	.....	4.74	.....	4.74	.....	9.10	8.02	6.04	5.32	3.32	10.95	2.20	7.27
Fort Greble, R. I	314	353.50	235.67	.....	.....	9.55	6.37	9.55	6.37	9.49	8.98	6.07	5.60	3.46	9.80	2.22	9.40
RECRUIT DEPOTS.																
Columbus Barracks, Ohio	1,295	2,067.95	1,245.56	46.42	39.34	18.53	17.76	64.95	57.10	50.12	46.93	34.63	32.75	18.30	8.85	12.64	10.15
Fort Slocum, N. Y	1,254	2,164.28	1,253.59	116.26	90.24	2.39	1.59	118.65	91.83	56.64	51.51	32.59	30.00	20.67	9.55	11.90	9.49
Jefferson Barracks, Mo	1,229	1,140.77	597.24	57.95	38.08	10.58	8.95	68.53	47.03	45.00	44.26	23.97	23.49	16.42	14.40	8.75	14.55
Fort McDowell, Cal	818	1,215.16	740.83	97.74	78.95	4.89	2.45	102.63	81.40	33.96	28.91	23.90	21.00	12.39	10.20	8.72	11.77
Fort Logan, Colo	590	1,771.19	911.86	132.97	104.90	1.69	1.69	134.66	106.59	53.53	44.15	34.21	30.18	19.54	11.03	12.49	13.69

INFLUENCE OF AGE AND LENGTH OF SERVICE.

The youngest soldiers and those serving their first enlistment had, as usual, the highest admission and discharge and noneffective rates, and the death rate was highest among those 45 years of age or over having 10 years or more of service. The lowest admission rate occurred in soldiers between 45 and 50 years of age, and the lowest constantly noneffective rate in those between 35 and 40.

The following table exhibits the effects of age and length of service upon rates for disease:

TABLE No. 36.—*Influence of disease on troops serving in the United States, continental (excluding Alaska), by age and length of service, year 1911.*

	Mean strength.	Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.	Ratio per 1,000 of mean strength.			
						Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.
Length of service:									
Under 1 year	10,204	15,876	346	56	506.11	1,555.86	33.75	5.46	49.60
1 to 2 years	6,589	3,905	84	8	146.68	592.65	12.69	1.21	22.26
2 to 3 years	11,852	6,891	83	13	255.65	581.42	6.97	1.09	21.57
3 to 4 years	6,043	3,758	53	10	146.36	621.88	8.73	1.65	24.22
4 to 5 years	3,518	1,643	25	5	66.79	467.03	7.07	1.41	18.99
5 to 10 years	8,770	4,564	86	23	194.08	520.41	9.76	2.61	22.13
10 years and over	8,264	3,458	59	42	143.26	418.44	7.10	5.06	17.34
Total	55,240	40,095	736	157	1,458.96	725.83	13.26	2.83	26.41
Age:									
19 years and under	2,019	2,847	49	13	90.03	1,410.10	24.15	6.41	44.59
20 to 24 years	21,404	20,266	343	49	677.53	946.83	15.94	2.28	31.66
25 to 29 years	15,550	9,769	162	28	381.00	628.23	10.37	1.79	24.50
30 to 34 years	8,390	3,903	105	28	169.77	465.20	12.45	3.32	20.24
35 to 39 years	4,209	1,782	48	20	77.59	423.38	11.35	4.73	18.44
40 to 44 years	2,187	887	15	10	35.70	405.58	6.82	4.55	16.32
45 to 49 years	1,070	405	5	5	17.15	378.50	4.65	4.65	16.02
50 years and over	411	236	9	4	10.18	574.21	21.79	9.69	24.76
Total	55,240	40,095	736	157	1,458.96	725.83	13.26	2.83	26.41

INFLUENCE OF SEASON.

Excluding venereal diseases, alcoholism, and injuries, the highest admission was in January, the highest noneffective and death rate in March. The lowest admission rate occurred in October, the lowest noneffective rate in July, and the lowest death rate in August.

The following table (No. 37) shows the movement of sick by months. A study of these data for previous years shows a wide variation in the months showing the several highest and lowest rates. It can be stated, however, in general terms that all rates are highest in the first half of the year and lowest in the second half. February and March give the highest constantly noneffective rates, and July and August the lowest.

CHART O.—*Showing (for the United States proper) the total admission rate for disease, by years, since 1888.*

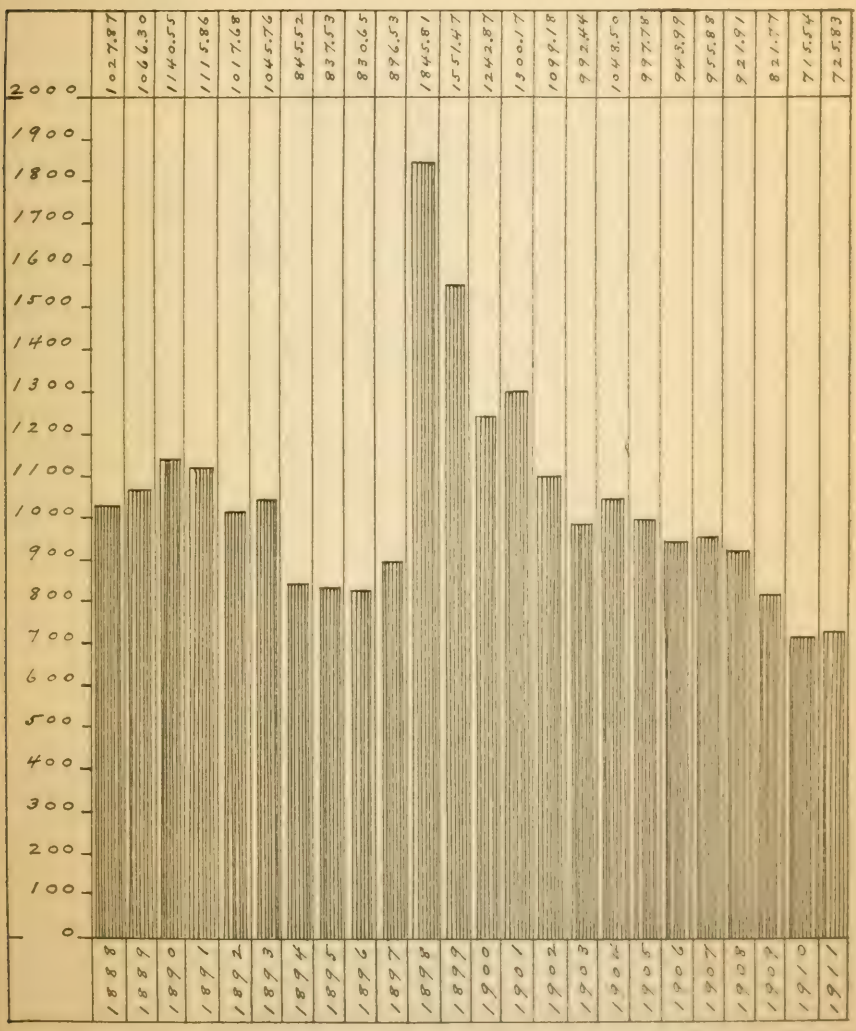


TABLE No. 37.—*Influence of season, United States, continental (excluding Alaska), year 1911.*

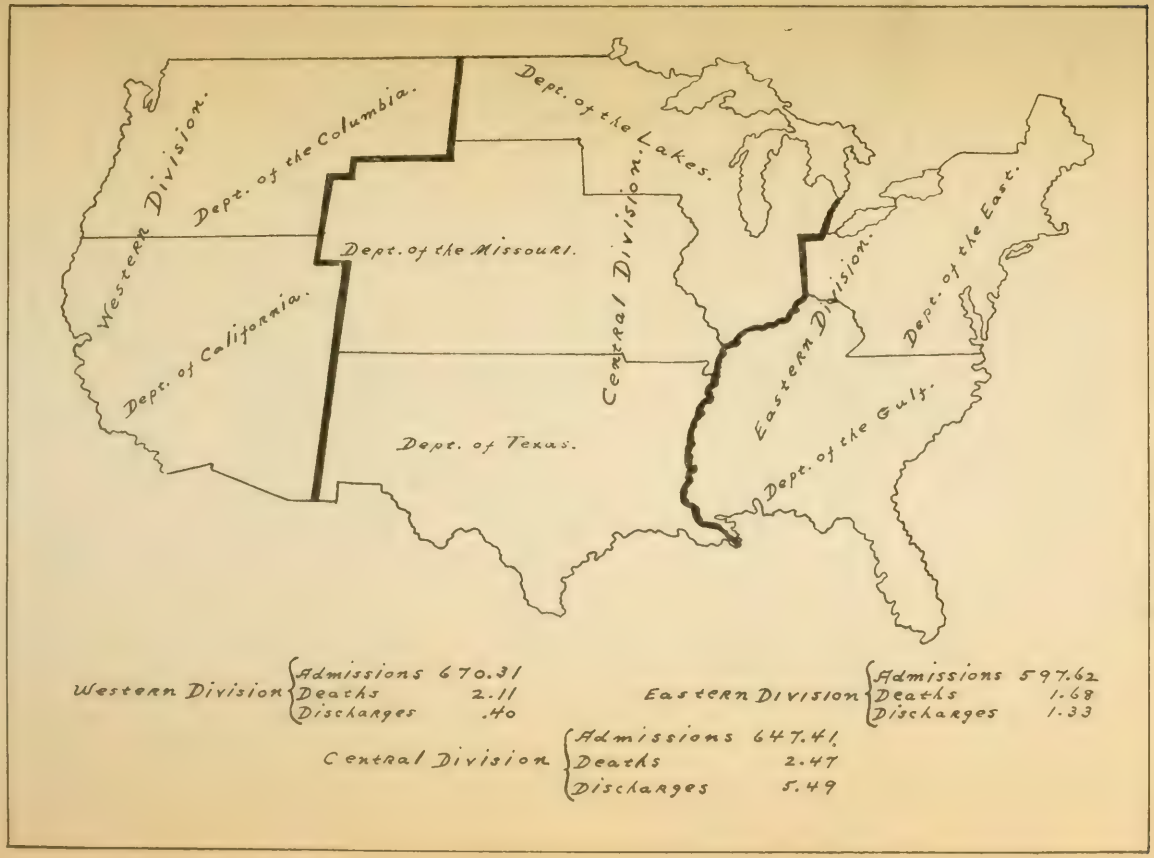
Month.	Mean strength.	Ratio per 1,000 of mean strength.								Prevailing diseases (exclusive of venereal diseases, etc.).
		All causes.					Exclusive of venereal diseases, injuries, alcoholism, and vaccinia.			
		Admissions.		Deaths.	Noneffective.		Admissions.	Death.	Noneffective.	
		Total.	Hospital.		Total.	Hospital.				
January	55,304	88.85	75.33	0.42	35.11	32.32	57.46	0.22	20.08	Tonsillitis, 489; influenza, 350; acute bronchitis, 304.
February	54,782	80.96	66.01	.44	37.34	34.13	51.79	.32	22.33	Tonsillitis, 432; influenza. 258; acute bronchitis, 244.
March	55,203	83.98	56.12	.58	34.66	31.03	54.53	.43	20.50	Tonsillitis, 399; acute bronchitis, 265; influenza, 218.
April	55,156	80.08	47.68	.42	33.46	29.48	51.71	.22	19.79	Tonsillitis, 299; diarrhea and enteritis, 280; acute bronchitis, 168.
May	56,122	73.06	39.31	.53	31.48	27.41	43.25	.32	17.41	Tonsillitis, 247; diarrhea and enteritis, 179; dyspepsia, 131.
June	55,345	66.85	38.90	.36	30.77	27.12	36.12	.16	16.14	Diarrhea and enteritis, 184; tonsillitis, 138; dyspepsia, 103.
July	55,511	71.81	51.86	.47	28.76	25.82	36.66	.18	14.08	Tonsillitis, 138; diarrhea and enteritis, 132; furuncle, 115.
August	56,951	68.06	51.48	.21	28.86	26.19	35.01	.09	14.11	Diarrhea and enteritis, 205; tonsillitis, 146; malarial fever, 112.
September	54,962	68.79	51.58	.33	29.90	26.84	36.52	.11	15.36	Malarial fever, 163; diarrhea and enteritis, 148; tonsillitis, 139.
October	55,260	65.94	50.04	.40	28.47	25.70	34.99	.22	14.65	Tonsillitis, 156; diarrhea and enteritis, 137; malarial fever, 132.
November	54,144	68.61	55.06	.33	29.34	27.02	35.08	.20	14.77	Tonsillitis, 205; acute bronchitis, 126.
December	54,138	70.89	60.01	.26	29.14	27.03	39.31	.17	15.22	Tonsillitis, 368; acute bronchitis, 111.
Total	55,240	887.80	642.83	4.72	31.40	28.30	513.18	2.63	17.00	Tonsillitis, 3,156; acute bronchitis, 1,762; diarrhea and enteritis, 1,549; influenza, 1,179; dyspepsia, 1,029; furuncle, 930; malarial fever, 811.

INFLUENCE OF RACE.

The white troops had higher rates than the colored for noneffective admissions, and discharges, being 31.68, 895.02, and 15.04, as compared with 26.38, 758.95, and 14.32 per 1,000. The death rate for colored troops was, however, higher, being 6.82, as compared with 4.60. These comparisons were also true for 1910.

For venereal diseases the rate for the white troops was 165.03 and for the colored 142.85; for alcoholism the rate for the white troops was 20.97 and for the colored 8.52; for tuberculosis (all kinds) the rate for the colored was 5.46 and for the white 3.80; for bronchitis the rate for the colored was 40.92 and for the white 34.03; for diarrhea and enteritis the rate for the white was 28.31 and for the colored

rates for disease.


Western Division.
Dept. of the Columbia.
Dept. of the Lakes.
Dept. of the Missouri.
Central Division.
Western Division.
Dept. of the East.
Dept. of California.
Eastern Division.
Dept. of the Gulf.
Dept. of Texas.
Western Division { Admissions 670.31 Deaths 2.11 Discharges .40
Eastern Division { Admissions 597.62 Deaths 1.68 Discharges 1.33
Central Division { Admissions 647.41 Deaths 2.47 Discharges 5.49

Military divisions, United States, continental (excluding Alaska), showing the relative admission, death, and discharge

23.18; and for rheumatism (all kinds) the rate for colored was 13.30 and for the white 10.30. The relative prevalence of the other several diseases in the two races are shown in tables Nos. 68 and 69 at the end of the report.

SANITATION, UNITED STATES.

The sanitary conditions throughout the Army for the year were very good. A review of the monthly sanitary reports for the year shows very few sanitary defects of any importance and when the attention of high authorities was called to such defects as existed by these reports, they were usually corrected with promptness, except in cases where large appropriations of money were required.

When the divisions were established July 1, 1911, chief surgeons being no longer required or authorized at the department headquarters, this office recommended that a medical officer be assigned to each division headquarters in addition to the chief surgeon as sanitary inspector. It was recognized that it would be an impossibility for the chief surgeon to attend to the multifarious duties of his office at headquarters and also make the necessary sanitary inspections of the posts in the division. The establishment of this office of sanitary inspector is a matter of great importance to the sanitation of the Army. It is very necessary for the efficiency of the medical department and for the sanitation of the various posts that a medical inspector should visit each post as a routine once a year, and more frequently if the necessity arises.

Another sanitary measure that has been gradually developing for several years, proved of great value during the year of 1911. This measure used throughout the Eastern and Central Divisions and a part of the Western Division, is a physical inspection of the enlisted personnel made twice a month. General Orders No. 17, War Department, May 31, 1912, now requires this inspection to be made at each post throughout the Army twice a month by a medical officer.

> Commanding officers will require a medical officer, accompanied by the company or detachment commander, to make a thorough physical inspection twice in each month of all the enlisted men (except married men of good character) of each organization belonging to or attached to the command. These inspections will be made at times not known beforehand to the men and preferably immediately after a formation. The dates on which the physical inspections of the various organizations are made will be noted on the monthly sanitary reports.
>
> At these inspections a careful examination of the feet and footwear and of the condition of personal cleanliness of the men will be made, as well as careful observation for the detection of venereal diseases.

These inspections have been of great value, not only for the detection of venereal diseases requiring treatment, but also for the examination of the teeth, the inspection of the body and clothing for evidence of personal uncleanliness and vermin, and for the observation of the feet and footwear.

The surgeon at Fort Screven, Ga., on two occasions at inspections found several men infected with pediculi corporis. These cases being detected lead to a careful disinfection of the companies and prevented the infection of others.

Particular attention has been devoted to the inspection of the feet and footwear. Various surgeons have commented on the abnormal

condition of the feet of the average soldier. Capt. Bourke, the surgeon at Fort Crockett, states that—

About 20 per cent of the men show abnormal conditions of the feet, including corns, deformed toes, ingrowing toenails, and bunions—conditions due chiefly to the wearing of unsuitable shoes. Few, if any, show the above conditions in a degree likely to cause disability, but their existence is evidence that shoes of the wrong size are sometimes worn, either through the fault of the soldier himself or because a wrong size is accepted, the correct size not being on hand.

These physical inspections will enable medical officers to frequently observe the feet of the soldier, and the attention of the company officers and of the enlisted men will thus be constantly directed to the necessity of proper care of the feet and of the proper fitting of shoes.

Relative to the good effects of these inspections, Maj. F. P. Reynolds, surgeon at Fort Monroe, says:

Physical examinations have improved the venereal situation, cleared up several cases of annoying skin diseases, and have brought cases of pyorrhea, alveolaris, gleet, ingrowing toenails, etc., to treatment. The moral effect has been good.

In the opinion of Maj. Rutherford, surgeon at Fort Totten—

The results of physical examinations, periodical and special, of feet, physique, cleanliness, teeth, venereal status, etc., as a routine sanitary measure have been positive and of the greatest importance. Low-grade types of constitutional and organic diseases, as well as incipient tuberculosis and other infections, have been discovered in these routine examinations.

As to the good effect for personal cleanliness, Maj. Rand, surgeon at Fort Hancock, states that—

The personal cleanliness of the men has been increased by these inspections, and in one instance, in which a soldier was found by the inspecting surgeon to be badly in need of a bath, his comrades threw the man, clothes and all, into a tub of water. It is needless to say that subsequently he was a model of cleanliness.

BARRACKS AND QUARTERS.

The double-tier bunks, relics of the dark ages of sanitation, appeared during the year at Fort Terry and Camp Otis, Panama. At Fort Terry the garrison was increased, and to accommodate the last company to arrive it became necessary to occupy an old set of barracks. Thirty-three double-tier bunks were put in use. The floor space for each man was 35 square feet and the air space 410 cubic feet. The heating and the lavatory facilities were also inadequate. However, measures were instituted as soon as possible to remedy these conditions.

The conditions at Camp Otis were due to the fact that the troops were hurried to Panama before adequate arrangements could be made to properly house them.

The old barracks occupied by four troops of Cavalry at Fort Robinson, as far back as 1895, were referred to in Munson's Hygiene as an example of what was insanitary. The cubic air space per man is too low. The ventilation is defective, they are heated by stoves, and there are no bathing or toilet facilities, and not even a place for urination in the building.

In the climate of Fort Robinson to require men to go out of doors for some distance to wash or attend to the calls nature is in itself a hardship. The surgeon attributes the prevalence of tonsilitis and bronchial troubles to the insanitary condition of these barracks.

The sanitary inspector, western division, reports that some of the barracks at Fort Stevens, Oreg., and Worden, Wash., are overcrowded. Recommendations have been made for measures to remedy this defect.

During the year the old guardhouse at Fort Leavenworth, which had been frequently reported as insanitary and overcrowded, was replaced by a new building. At Fort Jay the ventilation of the prison was improved by leaving a window for each cell open and conveying the air admitted to the upper part of the room by a canvas air shaft.

DISPOSAL OF WASTE.

The question of the disposal of garbage and of manure in a satisfactory manner without too great expense is one that does not seem to have been as yet satisfactorily settled. It is quite expensive to install and to operate crematories. Apparently either a satisfactory type of proper size for Army posts has not yet been constructed, or the ones installed are not properly operated. The experience of the Quartermaster's Department has been such an expensive and unsatisfactory one that the department is now reluctant to install any more at present. Capt. Percy L. Jones, Medical Corps, commanding Ambulance Corps No. 3 at Fort Leavenworth, has for several months disposed of the garbage of the company in a very satisfactory way. In a report furnished in November, 1911, he says:

> In barrack kitchen there are two large galvanized iron sinks, 4 by 2 by 1½ feet, one used for general police and the other for washing dishes and cooking utensils. These are drained by a large 2-inch pipe trapped just below sink and at entrance to sewer. In addition to the usual safeguard to drain a large wire basket, ¼-inch mesh, 2 by 2 feet by 4 inches, supported by $\frac{1}{16}$-inch wire pedestals, made by the mess sergeant, has been placed in one of the sinks. All the garbage is emptied into this basket and allowed to drain. Until it was necessary to start the winter fire in the furnace the solid garbage, after draining, was wrapped in small bundles and burned in the small furnace used for heating water in the basement of the barracks. Some of the bundles were burned in the kitchen while it was not being used in the preparation of meals. Since starting the winter fires all the bundles of garbage have been transferred to a galvanized iron can and fed directly into the large iron furnace. When judiciously handled this does not interfere with the heating of the building and adds very little to the duties of the firemen.
>
> Within two hours after the completion of the meals all the garbage is consumed by the fire. In my own home this method works equally well by using only the kitchen range. Cans and other noncombustibles are drained and carted away with the ashes. Where there is no furnace available in which the garbage can be consumed it can be burned in the kitchen range. This is always available from 6 p. m. to 4. a. m., and, if necessary, a special man can be detailed for the purpose.

In his opinion there are the following objections to methods generally employed in posts for the disposal of garbage:

1. The service is improperly supervised and irregularly performed.

2. Frequently it is turned over to civilians who pay a nominal sum for the garbage, which is used to feed hogs. Their transportation generally consists of ordinary wagons and barrels with a loose fitting top. In transferring from the galvanized iron cans to the barrel a tin bucket is used.

3. When carted away by the "Army cart" it necessarily means the expense of teams, drivers, and service of prisoners with guard, besides the erection of numerous wooden stands.

4. Even under supervision of guard, waste invariably occurs, rendering the surrounding ground moist and thereby contributing

every factor necessary for the incubation of flies; verily, a fly incubator in rear of each barracks during the summer months.

5. Difficulty, it might be said impossibility, in securing and maintaining tight-fitting tops for cans.

6. Danger of being overturned by prowling dogs.

7. These stands are unsightly, malodorous, and insanitary.

8. Even when placed in cans in a most sanitary manner the question of disposal still remains.

9. The average person is ignorant in regard to the danger likely to result from improper disposal.

Experiments are now being made at Fort Leavenworth to determine what the additional cost of fuel will be in disposing of garbage in the manner described by Capt. Jones.

The ultimate disposal of manure at the Presidio of San Francisco, Fort Lawton, Fort Bliss, and the Presidio of Monterey, as well as some other places, is a question that has not yet been satisfactorily solved. The California State Legislature in 1911 passed a new law, which forbids the dumping of garbage upon the navigable waters of the State of California or upon the navigable waters of the Pacific Ocean within 20 miles of the California coast. This law went into effect on May 1, 1912. As the garbage of the Presidio of Monterey had been dumped into the water of Monterey Bay it was necessary to make a change to comply with the law. There were two propositions considered: One was for the military authorities to lease or sell to the city of Monterey sufficient ground upon the military reservation to build and operate a crematory to dispose of the garbage and manure from the post for so much per ton. The other proposition was for the military authorities to construct a crematory for their own use. Neither of the two propositions were favorably acted on and experiments are now being conducted with improvised incinerators.

A method of incineration of garbage in camps by means of an attachment to the field range has been devised by Capt. Henry G. Thomason, Medical Corps, and is now being tested by experimental trial.

SEWAGE DISPOSAL.

The discharge of the post sewer system at Fort Leavenworth has finally been changed from above the water intake for the post and the city, and now empties into the Missouri River 500 yards below the intake of the water system. At Fort Mackenzie, Wyo., the sewer outlet is 307 yards from the nearest quarters and empties into ditch constructed for irrigation purposes. This forms a lake of frozen sewage in the winter some 100 yards wide and 600 yards distant from the barracks. This office has recommended that the outlet be placed about 1 mile distant from the post and that the sewage be properly distributed by lateral pipes and used for irrigating.

A sewage-disposal plant consisting of a septic basin, sprinkling filers, and sludge-digesting tank is being constructed at Fort Sheridan.

The sanitary inspector of the Western Division was directed to make a special inspection of Fort Douglas. The principal object of

this inspection was the location of the post stables and corral. The following is an extract from his report:

These structures are located immediately in front of the new infantry barracks, which are disposed in a loop about them at a distance of from 100 to 150 yards. The capacity of the stable is 96 animals, and it was apparently filled up at the time of my visit to the post. From a sanitary standpoint this arrangement can not be too strongly denounced; as horse manure is the favorite material sought by flies for the deposit of their larvæ. * * * Unless this stable and corral are moved to a proper site a suitable distance to leeward of barracks and quarters no amount of screening of the barracks or policing of the stable can prevent a pest of the filthy disease-bearing fly. Such a site had been selected about a quarter of a mile away from the nearest barrack, but some consideration of economy led to the abandonment of the plan or delay in the execution thereof. The location of a stable and corral in a most prominent situation in the main parade of a large and important military post from an æsthetic, military, and sanitary point of view is unique, not to say startling. The sensations of an observer accustomed to regard the aspect and condition of the parade as an index to the general sanitation of the station upon his first view of these homely but necessary structures thus located can scarcely be described.

The stables and corral for the mounted detachment and some of the transportation attached to organizations are also located too near the commissary, the bakery, and the quarters, but not in such an outrageous situation as the large general stable and corral before spoken of. No consideration of false economy should interfere with the immediate construction of sufficiently commodious stables for all the animals in the post on the well-chosen site formerly approved for that purpose.

In regard to the sewer system he reported that—

At some time in the history of the post (1903?) the old system of dry-earth closets was replaced by modern plumbing and a system of sewers was installed. These sewer pipes were buried but 2 or 3 feet in the soil; they were put in wrong end to; the joints were not properly cemented, and there are no manholes or lamp holes. The constructing quartermaster, Capt. T. B. Harker, who gave me these facts, states that it has never been cleaned, and that where it was necesssary to break an old sewer a mat of hair, matches, grease, etc., adhered to the top of the inside arch of the pipe, practically clogging half the pipe area, and that in summer the sewer lines can be traced by the more luxuriant vegetation growing over them. This last statement I was able practically to verify myself, as the course of the old pipe across the plain was clearly marked by a line of rank, dead weeds sticking up through the snow.

The line of the pipe is no longer on a fixed grade, artificial running traps having formed here and there by sagging. Capt. Harker states that this antiquated sewer system consists of 8 and 12 inch branches emptying into an 8-inch main, and this, in turn, passing through a 6-inch siphon at Mount Olivet Cemetery, the manhole overflows into the city street (East Fifth South Street), due to reduced area at 6-inch siphon and gorging of Government main down East Fifth South Street, due to city tapping same with two or three laterals at Thirteenth, Twelfth, and Eleventh East Streets. The new sewer system of the recently constructed barracks, the new hospital, and the old barracks altered into officers' quarters empties into the main of this old system below the first bench. The old line of officers' quarters is still connected with it, and must remain so until funds are allowed for new and proper connections, sunk to the depth of the more recent system. When total clogging of the old main occurs, as seems eventually to be inevitable, the sewage of the post will be spread out on the lower parade. It is an evident necessity that the old system should be abolished and obliterated as soon as new mains can be laid and new branches be sunk to replace such of the old as remain in use. Action should be taken to induce the authorities of Salt Lake City to increase the capacity of the pipes which receive the post sewage at the city limits, and thus terminate the present unsanitary condition.

Recommendations have been made by this office that the stables be moved to a more suitable location and that a modern sewerage system be installed.

The question of the disposal of the sewage at the site of the annual encampment at Fort Hancock has been a subject for a good deal of correspondence during the year. Heretofore McCall incinerators have been used there to dispose of the human excreta. The ones in

use, however, being about worn out, requisition was made for enough of them to equip the camp. In an indorsement from this office on September 20, 1911, it was stated that—

In view of the great success with which a simpler and less expensive mode of incineration of fecal matter in camp has been used in place of the very expensive and nontransportable McCall incinerators, it is recommended that instead of purchasing new incinerators the system of disposal of wastes employed at the maneuver camp at San Antonio, Tex., be utilized at this camp. If the soil at the place of encampment is too sandy to make the construction of latrine pits practicable, it would be much cheaper to have these bricked up than to purchase incinerators. An alternative which might be worth consideration if the camp is located near the sea would be the construction of a short sewer line.

It was eventually decided, however, in view of the fact that the camps are in use for a considerable period each year, that it would be more satisfactory and economical in the end to construct a sewerage system.

The board of officers appointed by Special Orders, No. 238, October 13, 1909, War Department, composed of Lieut. Col. Jefferson R. Kean, Medical Corps, Maj. Frederick F. Russell, Medical Corps, and Capt. Edward T. Hartmann, quartermaster, to study and investigate the question of water supply and sewage disposal at posts, in September, 1911, proceeded to Atlanta, Ga., to examine into the question of sewage disposal at Fort McPherson. The board reported:

The outfall sewer was found to be located in a ravine running southwest and situated near the middle of the west side of the reservation. This ravine carries storm waters from a large portion of the reservation but contains running water only in wet weather and after rains. Before discharging into this ravine, the sewer empties into a small brick cesspool, which, when the post is occupied by its full garrison, is certainly too small to have any effect as a septic tank. It does, however, act as a catch basin for detritus, coarse suspended matter in the sewage, and fills up rapidly with offensive sludge, which has in the past been cleaned out and buried at long intervals. The channel of the stream below the outfall was covered with a thick growth of gray fungoid plants, characteristic of sewage polluted streams. Some orange-colored fungoid growths were also noted, but none of the green water plants characteristic of pure streams were found. The discharge from this ravine is into Utoy Creek, which discharges into the Chattahoochee River. The preservation of the purity of this stream is considered of sufficient importance to have caused the municipal authorities of the city of Atlanta to appropriate $3,000,000 for the establishment of three large modern sewage purification plants.

After a most careful consideration of all the facts and conditions, the board is strongly of the opinion that a sewage disposal plant, consisting of a grit chamber, preliminary settling tank, dosing chamber, sprinkling filter, and small settling tank, should be installed at this post, and the board so recommends.

SANITATION IN THE CAMPS ON THE MEXICAN BORDER.

Mention was made in the last report from this office of the division camp at San Antonio, Tex., and the camp of the separate brigades at Galveston, Tex., and San Diego, Cal., and the excellent sanitary record of these camps. Mention will be found under the head of special diseases, typhoid fever, of the occurence of that disease there. Since these camps were discontinued last summer there have been several for various sized bodies of troops, at times several regiments in all, in camp on the border. The same general scheme of sanitation which was found so successful in the camp at San Antonio was followed with great success. Latrines with modified Havard boxes burned out daily with crude oil and straw have been used for the disposal of human excreta, the kitchen waste has been burned on an

improvised rock-pile incinerator at each kitchen, and the manure and other refuse burned on improvised rock-pile incinerators. The result has been most satisfactory.

SMOKE NUISANCE.

Complaints from several posts have reached this office of the smoke nuisance caused by burning soft coal in the post. It certainly does not seem desirable to this office that for the purpose of a little supposed economy that the beauty of a post should be destroyed, the buildings rendered unsightly, and the health of the inhabitants endangered by clouds of smoke. At present when attempts are being made throughout the country to abate the smoke nuisance, the National Government should not be numbered with those who heed not the dictates of reason and sanitation.

SERVICE CAP AND CAMPAIGN HAT.

The service cap the use of which is obligatory now at posts in this country has been reported upon adversely by several surgeons. It is very apparent that this cap does not afford the desired protection to wearer in hot climates. The cap is so constructed that the top of the crown fits directly on the head at one place and the visor affords practically no protection to the eyes and face. In consequence of the reports above referred to and the recommendation of this office, commanding officers at a number of posts on the southern border have been authorized to permit the use of the campaign hat instead of the cap in very hot weather.

SHOES.

The Army is now fully convinced of the necessity of having military shoes made on a correct last and properly fitted. The lasts and styles of the shoes have been changed from time to time, and each time the change has apparently resulted in a better shoe being adopted. The tan and black garrison shoes as at present issued have been found very satisfactory on the whole. Not so much can be said of the present marching shoe. Numerous adverse reports have been received from various surgeons. The majority of them report (*a*) that the toe of the shoe is too low, (*b*) that the toe of the shoe does not properly protect the toes of the foot, (*c*) that the width of the shoe is too great for the length, and hence if a shoe is long enough for the foot it is too wide, (*d*) and the instep is too low. This question has been under consideration for several months by a board at Fort Leavenworth, with Maj. E. L. Munson, Medical Corps, as president. A great many radiographs have been made of feet with shoes of various patterns and without shoes. These radiographs show that practically the feet of all adults are deformed from wearing shoes made on an improper last. The board suggested that a number of shoes be made on a set of lasts recommended by them, and that a practical test be made of these shoes under the supervision of the board. This was done. A command of 379 men were properly fitted with these shoes, under the supervision of the board, and went out on a practice march of 117 miles, occupying 9 days. Care-

ful notes were kept and examinations made both by inspection and X ray. It is believed that a satisfactory field shoe has been devised as the result of the work of this board. The same last will be used for all shoes, both garrison and field, black and tan.

The board calls attention to the fact that the shoe can not be fairly considered by itself alone, since its actual utility depends upon the tripod of construction, supply, and fit. If any leg of this tripod fails the whole structure falls to the ground and the shoe is unsatisfactory. The report is of great and permanent value in that it not only discusses in a thorough and scientific manner the qualities which are essential for a military shoe, but that it also demonstrates that many soldiers do not select shoes that fit them, and that for this reason trouble may occur with the very best shoe. Their recommendations with regard to fitting are very practicable, specifying the method of fit, and providing that the fitting of shoes shall be personally supervised by an officer. They also made the wise suggestion that officers should be given a course of instruction in care of the feet, including the fitting of shoes. The board calls attention to the fact that the Quartermaster's Department, not realizing the importance of the matter, has not, heretofore, furnished to each post a sufficient supply of shoes of each size and width to enable company officers to fit their men. This leg of the tripod, as pointed out by the board, is as essential as any other.

Capt. Weed, Medical Corps, in a special report on feet and footwear, points out that the fitting of the socks is a matter of great importance. A pair of socks of improper size may cause almost as much injury as shoes of improper size.

The surgeon at Jefferson Barracks, in November, 1911, stated that only one pair of shoes was issued to each recruit upon enlistment, which were used on all occasions and in all sorts of weather while the recruit remained at the depot. A change of shoes was, in his opinion, as necessary in wet weather as a change of socks. Upon his recommendation, orders were issued that each recruit be furnished with two pairs of shoes.

FOOD.

The food supply and its preparation have been reported as almost uniformly satisfactory.

CIVILIAN DIVES NEAR POSTS.

The surgeon at Fort Screven, Maj. Woodbury, has the following to say in regard to the "dives" near the post:

> The filthy dives immediately facing the track and post undoubtedly furnish a large part of our alcoholic and venereal cases, also a plague of flies from garbage and fecal matter deposited everywhere on the ground.

At a large number of posts in the United States there is a similar complaint. It is a matter which the National Government can not control. These dives elsewhere as well as at Fort Screven furnish a large part of the alcoholic and venereal cases.

WATER SUPPLY.

The water supply at Fort Oglethorpe, which has heretofore always been reported as unsatisfactory, can now be reported as potable. The water is now purified by the use of hypochlorite of calcium, and the examination made shows that the water so treated is satisfactory.

Mention was made in the last report of the method of sterilization of water by the use of pure chlorine gas, a method which has been devised and brought to the attention of the War Department by Maj. Carl R. Darnall, Medical Corps. Arrangements have been made to install this system at Fort Sill, Okla. There is every reason to believe that this method of sterilization will be found to be the most satisfactory of any method of chemical disinfection yet devised. The method is inexpensive to install and inexpensive to operate, and rests upon a clear scientific basis. With a chemical of known power as a disinfection in known quantities, definite results can be obtained. Recommendations have been made that this system be also installed at Frankford Arsenal, Pa., where the water is reported as unsatisfactory.

The water supply at Fort Ontario is obtained from the city water system of the city of Oswego. The intake of this system was formerly only about 800 feet from the shore and was really in the Oswego River rather than in Lake Ontario. The intake during the year, however, was extended to 8,800 feet from the shore into Lake Ontario. The depth of the water at the intake is 80 feet. The water now, as reported by the surgeon, is satisfactory. The sanitary inspector of the western division reported that in his opinion there was danger of contamination of the water supply at Fort Douglas, Utah, on account of the location of the house of the caretaker near the intake. Orders were issued that this house be moved. On account of the very small precipitation for the past two years in the vicinity of Fort Russell, the water reservoirs have been very low and quite dirty at times, with considerable growth of algæ.

There was for a while some shortage of the water supply at Fort Lawton due to the inadequate size of the main leading to that part of the city and to the fort. This defect has been corrected.

At Fort Wadsworth the water supply was reported as inadequate, the system old, frequently broken, and almost constantly in need of repair. This condition has been remedied. At Fort McKinley, Me., and Fort McIntosh, Tex., the water supply in the summer of 1911 was reported as inadequate. The surgeon at Fort Sheridan reports that the water is still subject to contamination. The water at Fort Omaha is unsafe, and supply for drinking is hauled from an artesian well in the city. A great deal of difficulty has been experienced at Fort H. G. Wright, N. Y., and at Fort Stevens, Oreg., in obtaining water that is not brackish. A number of wells have been dug without very satisfactory results. It has finally been decided to build cisterns at Fort H. G. Wright for drinking water and to use the water from the wells for other purposes.

A tabular statement showing the source, quality, and method of purification, if any, of the water supply at each garrisoned post of the United States, was given in the last annual report, pages 84–87. The following changes have been made during the past year:

Changes in water supply, garrisoned posts, United States, year 1911.

Post.	Source.	Purification.	Quality.
Barry, Cal.	Wells and springs.	None.	Good.
Boise Barracks, Idaho.	Obtained from springs in mountains 5 to 8 miles distant; gravity system; no impounding reservoir; 2 reservoirs at post; capacity, 45,000 and 500,000 gallons.	do.	Do.
Crockett, Tex.	Galveston city water supply, piped from artesian wells 20 miles distant.	Not reported.	Do.
D. A. Russell, Wyo.	Crow Creek (Cheyenne water system), surface, impounded: artesian emergency supply.	None reported at present.	Doubtful.
McKinley, Me.	Artesian wells; adequate in summer with economy.	Mechanical chemical water softening plant.	Good.
Oglethorpe, Ga.	Deep wells.	Hypochlorite treatment.	Subject to contamination.
Omaha, Nebr.	Omaha Water Co.	Distilled or boiled.	Bad.
Washington, Md.	Artesian wells.	None.	Good.
William Henry Harrison, Mont.	Helena, Mont., water supply	do.	Do.
Wright, H. G., N. Y.	Wells (contract recently awarded for a number of concrete cisterns for the collection of rain water for domestic purposes).	do.	Fair, brackish.

Popular interest in sanitary matters has been stimulated by the meeting in Washington from September 23 to 28, inclusive, of the Fifteenth International Congress on Hygiene and Demography, in which the War Department took an important part, both by the participation of a number of its medical officers in proceedings and by exhibits offered by the Medical Department, the Commissary Department, and the Quartermaster's Department. The value of these exhibits is liberally recognized by the diplomas granted by the committee of awards as follows:

1. A diploma of superior merit to the Medical Department, U. S. Army, for exhibits showing the investigation and development of methods of prevention of uncinariasis, typhoid fever, beriberi, and certain other communicable diseases.

2. A diploma of merit to the Medical Department, U. S. Army, for exhibition of apparatus for the disinfection of water by chlorine gas.

3. A diploma of merit to the Medical Department, U. S. Army, for the exhibition of a field hospital.

4. A diploma of merit to the Quartermaster's Department, U. S. Army, for exhibition of clothing and tentage for soldiers.

5. A diploma of merit to the Commissary Department, U. S. Army, for the exhibition of a field bakery.

ALASKA.

The mean enlisted strength of the troops serving in Alaska during the past year was 1,119 as compared with 1,081 in 1910. This force consisted of Infantry, Signal Corps, and Hospital Corps, all white. Alaska still maintains its position as being by far the healthiest region where the Army is stationed. The noneffective, admission, and discharge rates were lower than for 1910, being 13.15, 418.23, and 4.47 per 1,000, respectively, as compared with 17.01, 452.36, and 7.96. These rates for the United States for 1911 were 31.40, 887.80, and 15. The average number of days' treatment for each case was 11.47. In the United States it was 12.91. The death rate, 6.26, was much higher than 2.65, the rate for 1910. There were 7 deaths. There were 9 invalided home, the same number as in 1910. Two of these were for tuberculosis, and one each for chronic alcoholism, insanity, neuralgia, inguinal hernia, chronic nephritis, gunshot wound, and frostbite.

TABLE No. 38.—*Influence of station, year 1911, Alaska.*

	Mean strength.	Ratio per 1,000 of mean strength.										Average number of days lost.			
		Admissions to sick report.		Discharged on surgeons certificate of disability.		Deaths.		Total losses.		Noneffective from sickness.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
										From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.					
		From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
Fort William H. Seward	339	342.18	200.59	.....	.....	2.95	.....	2.95	2.95	9.09	7.65	4.84	4.41	3.32	9.70	1.77	8.81
Fort Gibbon	281	419.93	195.73	3.72	.....	3.56	3.56	7.28	3.56	12.20	8.63	4.31	3.68	4.45	10.60	1.57	8.04
Fort Liscum	194	577.32	314.42	10.87	10.87	10.31	5.15	21.18	16.02	20.89	17.20	12.27	10.59	7.62	13.21	4.48	14.25
Fort St. Michael	152	328.95	223.70	6.94	6.94	6.58	6.58	13.52	13.52	10.90	10.31	5.39	5.30	3.98	12.10	1.97	8.79
Fort Davis	146	465.75	184.93	.....	.....	13.70	6.85	13.70	6.85	13.51	11.97	3.21	2.87	4.93	10.59	1.17	6.33
Fort Egbert	38	184.21	52.62	27.78	.....	.....	.....	27.78	.....	19.03	18.67	2.09	2.09	6.95	37.72	.76	14.50
Fairbanks	22	181.82	90.91	.....	.....	45.45	45.45	45.45	45.45	2.12	1.87	.37	.12	.77	4.25	.14	1.50
Total officers and enlisted men	1,172	405.29	212.46	4.47	2.68	6.83	4.27	11.30	6.95	12.77	10.60	5.64	5.03	4.66	11.50	2.06	9.69
Total enlisted men	1,119	418.23	217.16	4.47	2.68	6.26	4.47	10.73	7.15	13.15	11.06	5.70	5.23	.....	.....	.....	.....

For detailed information in regard to the movements of the sick see Table No. 70, on page 236.

The principal causes of admission for disease were venereal diseases 34.83, alcoholism 29.49, bronchitis 20.55, pneumonia (lobar) 4.47, and broncho-pneumonia 3.57. The rates for these diseases for the United States were respectively 163.85, 20.31, 34.40, 1.97, and 0.34. The infectious diseases were noticeably absent, no case being reported of typhoid fever, smallpox, scarlet fever, or diphtheria, and only two of measles, and two of pulmonary tuberculosis.

PORTO RICO.

There are in Porto Rico two military posts, San Juan at the capital, and Henry Barracks in the interior, both garrisoned by the Porto Rican Regiment. The mean enlisted strength for 1911 was 563. The enlisted strength of this regiment is recruited from native Porto Ricans, the officers being in part Americans and in part Porto Ricans.

TABLE No. 39.—*Movement of sick in Porto Rico, year 1911.*

	Years.	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
		Total.	In hospital.	Total.	In hospital.
Ratio per 1,000 of mean strength:					
Admissions to sick report	1911	1,050.00	987.93	770.69	.....
	1910	952.62	895.00	656.51	.....
Discharges on certificate of disability	1911	8.62	.....	6.90	.....
	1910	15.23	.....	5.08	.....
Deaths	1911	6.90	.....	3.45	.....
	1910	.....	.....	.....	.....
Total losses	1911	15.52	.....	10.35	.....
	1910	15.23	.....	5.08	.....
Noneffective	1911	29.78	28.55	16.58	15.90
	1910	31.98	29.88	17.66	16.16
Average number of days lost:					
For each soldier	1911	10.87	10.42	6.05	5.80
	1910	11.43	10.72	6.36	5.82
For each case	1911	10.35	10.55	7.85	.....
	1910	12.20	12.16	9.81	.....

The noneffective and discharge rates were both lower than for 1910. The admission rate and the rate for deaths and for total losses were, however, higher. The lower noneffective rate with a higher admission rate was due to the smaller average number of days lost for each case admitted.

Table No. 40 gives the rates for the prevailing diseases, from which it will be seen that there is a marked increase in the rates for venereal diseases, malarial fevers, and ankylostomiasis. There is a decrease for filariasis and typhoid fever.

TABLE NO. 40.—*Diseases of Porto Rican troops, admission rates per 1,000 of mean strength.*

	1911	1910	1909	1908
Venereal diseases	191.38	162.44	250.44	242.91
Chancroid and results	101.72	55.84	89.95	60.28
Gonorrhea and results	60.34	74.45	126.98	143.62
Syphilis and results	29.31	32.15	33.51	39.01
Malaria	131.03	74.45	179.89	219.86
Ankylostomiasis	96.55	76.14	8.82	14.18
Dyspepsia	93.10	16.92	49.38	62.06
Influenza	46.55	23.69	82.89	83.33
Furuncle	44.83	57.53	109.35	78.01
Filariasis	20.69	28.76	22.93	3.55
Dysentery	18.97	22.00	14.11	15.96
Bronchitis, acute and chronic	15.52	20.30	29.98	19.50
Smallpox	6.90	1.69	3.53	7.09
Insanity	5.45	3.38	3.53	1.77
Rheumatism, acute articular	3.45	1.69	8.82	5.32
Typhoid fever	1.72	5.08	5.29	5.32
Tuberculosis	1.72	1.69	3.53	1.77
Measles		1.69	17.64	19.50

Relative to the presence of certain diseases among the native troops in Porto Rico, Maj. Ashford, surgeon at San Juan, reports as follows:

Three diseases which contribute very largely to the sick rate should be mentioned, and all are classed as "tropical diseases:" Uncinariasis, filariasis, and malaria. The first has been a puzzle to the surgeon for some time, for men known not to have the intestinal parasite have been enlisted and have afterwards become sick from the infection contracted in some unknown manner. This mystery was solved by the examination of 50 men who were found to have had ground itch or "mazamorra" as the result of a single practice march. These men upon reporting were all subjected to a microscopic examination of their feces and in 30 ova of uncinaria were found. These were discarded and the 20 men left were examined every 10 days thereafter until ova appeared, which they did in all cases save two.

These two cases were probably not cases of ground itch, but simply of bromidrosis, with excoriation of the feet. The remaining 18 all developed ova about the same time (50 to 60 days after their ground itch). None of them exposed their bare feet to infestation and all were undoubtedly affected by muddy water, which percolated through shoes and leggins. As long as practice marches and campaigns are undertaken in tropical countries therefore we can expect multiple infections of uncinarias, for which there is no remedy except rubber boots, an impracticable measure. I consider this observation worthy of especial emphasis in order to explain the unusual prevalence of uncinariasis at this post.

Filariasis is fairly common and varicose groin glands, buboes, hydroceles, etc., might be attributed to venereal disease by one not versed in the practical knowledge of this queer disease, especially if dependence be placed on microscopic examination of the blood, which is more frequently than not, negative. This mosquito-borne disease places the garrison at the mercy of the health service of San Juan, and will disappear only when the mosquitoes are exterminated from the city.

RECRUITING.

Seventy-nine and five-tenths per cent of the recruits for the Porto Rico regiment examined by medical officers were accepted, as compared with 49.6 per cent for 1910; 36.7 per cent of the accepted candidates were between the ages of 21 and 25, inclusive, and only 3 were under 21; 60.3 per cent were 66 inches or under in height, and 30 reached the height of 5 feet 9 inches or over; 76.1 per cent of recruits were under the average height of the American recruits, viz, 67.56 inches; 46.5 per cent weighed less than 130 pounds, and 16 weighed 150 pounds or over; 64.4 per cent had a chest measurement of 33 inches or under, and 13.2 per cent had chest measurement of 35 inches or over, as compared with 16.6 per cent for last year.

REJECTIONS.

TABLE No. 41.—*Causes of rejection of applicants for enlistment, Porto Rican regiment, year 1911.*

	Total.			Total.	
	Number.	Ratio per 1,000 rejected for all causes.		Number.	Ratio per 1,000 rejected for all causes.
Under weight	20	243.90	Under height	3	36.59
Chest development insufficient	10	121.95	Diseases of the ear, including defects of hearing	2	24.39
Diseases of the eye, including defects of vision	9	109.76	Hernia	2	24.39
Curvature of the spine	5	60.98	Varicose veins	2	24.39
Defects of development	5	60.98	Venereal diseases	2	24.39
Defective teeth	4	48.78	Diseases of the respiratory system	2	24.39
Diseases of the skin	4	48.78	Other causes, each one	6	73.20
Flat feet	3	36.59			
Heart disease	3	36.59	Total	82	1,000.00

Twenty-four and four-tenths per cent of the rejections were caused by a deficiency in weight, 12.2 per cent by insufficient chest development, and 10.9 per cent by diseases of the eye, including defects of vision. Venereal diseases caused only 2.4 per cent of rejections as compared with 9.5 for 1910.

HAWAII.

Only one island of the Hawaiian group is garrisoned, namely, Oahu, on which is situated the city of Honolulu. The mean enlisted strength of the garrison during the year was 2,014 as compared with 1,220 in 1910. In spite of its salubrious and temperate climate and the absence of the more serious epidemic diseases, the noneffective, admission, and discharge rates were higher than for the United States. The average number of days' treatment for each case was 15.04 days, as compared with 12.91 for the United States. The death rate was, however, lower. The noneffective and admission rates (enlisted strength) were 44.52 and 1,080.44 per 1,000, as compared with 49.88 and 1,009.84 for 1910. The discharge and death rates were 13.90 and 2.98, as compared with 17.14 and 2.45 for 1910. It will thus be seen that the noneffective and discharge rates were lower in 1911 than in 1910, while the admission and death rates were a little higher. Fifty-three cases were invalided home; of these 11 were for venereal diseases; four each for tuberculosis and diseases of the nervous system; three each for insanity, organic disease of the heart, and muscular rheumatism; 2 each for cataract and secondary result of injury, and 1 each for 21 other causes. For detailed information in regard to the movements of the sick see Table No. 70 on page 236.

There are at present four posts garrisoned. These are Schofield Barracks, Fort Shafter, Fort Ruger, and Fort De Russy. At Schofield Barracks where a regiment of Cavalry, two battalions of Infantry, and three batteries of Field Artillery are stationed, the barracks and quarters are temporary wooden structures. In the Cavalry canton-

ment both hot and cold showers are provided, but in the Infantry and Artillery only cold. With a mean minimum temperature in December, January, February, March, and April of less than 60° F. and as low as 51°, it is evident that heated water should be furnished to all for bathing purposes. McCall and Conley incinerators have been used for the enlisted force in barracks and dry-earth closets for officers' quarters and all others.

Considerable difficulty has been experienced in the disposal of the sewage. At first cesspools were used with provisions for draining the overflow into a neighboring gulch. These cesspools, however, proved to be very unsatisfactory. The drains did not work properly and the surrounding ground was flooded. In addition the odor from them was quite marked and very annoying. Steps have been taken, however, to discontinue the use of the cesspools and fill them up. The sewage is conveyed by the drains to within about 2,000 feet from the gulch into which it is deposited through an open ditch. The chief surgeon states that the piping should be continued to the brow of the gulch as an open ditch will prove a breeding place for mosquitoes.

An irrigation ditch passes through the post. The surgeon recommends the filling of this ditch if the terms under which the grounds are held will permit. The ditch in question belongs to a neighboring sugar plantation.

Fort Shafter which is garrisoned by one battalion of Infantry, is the old post in the islands. The sanitary arrangements there are good and are similar to those in the majority of posts in the United States. The buildings and sanitary arrangements at the other two posts are still temporary in character but are satisfactory. In the early part of 1911 cholera appeared in epidemic form in Honolulu, and one case of yellow fever developed on November 1. The origin of this case is of some epidemiological interest. On October 21, 1911, the Japanese steamer *Hongkong Maru* arrived from Manzanillo, Mexico, with a convalescent case of yellow fever on board. She was placed in quarantine and a native watchman was placed on board of her. This watchman was doubtless bitten by an infected mosquito and was taken sick at his home, and the nature of the case not suspected until there had been abundant opportunity for the infection of mosquitoes. Energetic mosquito destruction was, however, initiated and no secondary cases developed. No case of cholera or yellow fever occurred in the military population.

TABLE NO. 42.—*Influence of station, year 1911, Hawaii.*

	Mean strength.	Ratio per 1,000 of mean strength.												Average number of days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective rates.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
										From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.					
		From all causes.	Exclusive of injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Exclusive of injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Exclusive of injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Exclusive of injuries, venereal diseases, alcoholism, and vaccinia.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
Schofield Barracks	1,467	1,116.56	637.36	13.80	1.62	2.73	.68	16.53	3.41	39.13	30.66	17.81	14.53	14.28	12.75	6.50	10.20
Fort Shafter	299	906.35	454.85	7.09	7.09	3.34	3.34	10.43	10.43	97.97	95.30	45.97	44.59	35.76	39.45	16.78	36.89
Fort Ruger	200	850.00	560.00	31.41	15.71	5.00	.....	36.41	15.71	15.14	7.71	8.04	3.93	5.52	6.50	2.93	5.24
Fort De Russy	152	1,085.53	664.47	6.80	6.80	6.58	.....	13.38	6.80	15.77	11.95	7.95	6.54	5.76	5.30	2.90	4.37
Total officers and enlisted men	2,136	1,054.31	603.46	13.90	10.92	3.28	.94	17.18	11.86	43.14	35.98	20.00	17.06	15.75	14.94	7.30	12.09
Total enlisted men only	2,014	1,080.44	611.72	13.90	10.92	2.98	.99	16.88	11.91	44.52	38.14	20.15	18.08	16.25	15.04	7.36	12.03

PHILIPPINE ISLANDS, AMERICAN TROOPS.

The improvement in the health of the American troops in the Philippines noted in the annual reports of years past continues to be maintained. As shown in Table No. 6, the admission rate for disease and the constantly noneffective rate were better for 1911 than for 1910, which was in turn better than for any preceding year. The death rate was, for disease, much lower than in 1910, but that for external causes was much higher, making the total rate higher, it being 5.30 in 1911 and 5.19 in 1910. Among the deaths from external causes there were 17 deaths from wounds, 5 for fractures, exclusive of gunshot, and 8 for drowning. Of the deaths from wounds, there were 5 killed in action.

The mean strength of the American troops was 12,454, not including a force of native troops, the Filipino Scouts, with a mean strength of 5,266, for whom medical statistics will be given separately on page 122.

During the year there were 15,172 admissions, with a mean strength of 12,454, making an admission rate of 1 218.24, which was lower than the rate for 1910, which was 1.242.65. Of the command, there was an average constantly noneffective of 537.37, making a noneffective rate of 43.15 per 1,000, which was lower than the rate of 45.45 for 1910. Both the admission and constantly noneffective rates for the American troops continue to be much higher than that for the Filipino troops, the causes for which are discussed on page 133. A total for all troops, American and Filipino, of 242,532 days was lost in quarters and hospital. Of this number, 147,374 were from causes incurred in the line of duty and 95,158 not in line of duty.

The most important diseases showing a decrease are, with their rates, typhoid fever, 0.88; undetermined fevers, 6.74; malarial fevers, 75.56; dysenteries, 14.37; tuberculosis (all), 3.77; and diarrhea and enteritis, 46.09, the rates for 1910 being, respectively, 2.53, 10.75, 86.34, 19.39, 5.46, and 74.86. There was a slight increase for insanity, the rate being 2.01 per 1,000 in 1911 and 1.87 in 1910. There was a decided increase for venereal diseases, the rate being 305.12 in 1911 and 275.64 in 1910, and for dengue the rate being 115.95 in 1911 and 82.84 in 1910.

The diseases causing the highest noneffective rates were venereal diseases, 16.63 (17.72 in 1910); dengue, 1.99 (1.53 in 1910); malarial fevers, 1.78 (2.32 in 1910) diarrhea and enteritis, 0.92 (1.38 in 1910); and dysenteries, 0.90 (1.26 in 1910). The principal causes of deaths were (absolute numbers), gunshot wounds 9, other wounds 8, drowning 8, fractures (exclusive of gunshot wounds) 5, organic disease of the heart 5, and acute poisonings 3. There were 5 men killed in action, 9 suicides, 5 homicides, and 23 accidental deaths.

PREVALENCE OF SPECIAL DISEASES, AMERICAN TROOPS.

TYPHOID FEVER.

The admission rate was 0.88 per 1,000, as compared with 2.53 for 1910, 6.15 for 1909, and 2.76 for 1908. This rate was higher than that for the Army as a whole which was 0.75. In absolute numbers there were 11 cases among the enlisted men and one case in an officer. All of these cases were sporadic, no epidemic occurring during the year. There was no death. Especial mention is made of this under the discussion of this subject for the United States on page 46.

TABLE NO. 43.—*Typhoid fever, Philippine Islands, year 1911.*

Posts.	Mean strength.	Admissions.							
		Americans (mean strength, 13,489).				Philippine Scouts (mean strength, 5,266).		Total.	
		Officers.		Enlisted men.					
		Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Cotabato, Mindanao	254					5		5	
Ludlow Barracks, Mindanao	543	1		1				3	
Field Luzon	589			1		2		3	
Fort Mills, Luzon	1,732			2				2	
Camp Stotsenburg, Pampanga	1,201			2				2	
Siquijor, Negros	211					2		2	
Camp Connell, Samar	450					1		1	
Camp Downes, Leyte	254			1				1	
Camp Overton, Mindanao	309					1		1	
Makar, Mindanao	48					1		1	
Fort William McKinley, Luzon	2,887			1				1	
Camp McGrath, Batangas	834			1				1	
Camp Wilhelm, Luzon	239			1				1	
Cuartel de Espana, Manila	539			1				1	
Total	18,755	1		11		12		24	

NOTE.—The typhoid fever rate was much smaller among American troops than the Filipino Scouts because the former were partially protected by antityphoid vaccination.

MALARIAL FEVERS.

The admission rate for all fevers of this class was 75.56 as compared with 86.34 for 1910, 112.35 for 1909, 123.97 for 1908, 167.79 for 1907, and 304.20 for 1906. Malarial fevers stand third among causes of admission for American troops.

The post having the highest admission rate was Augur Barracks, Jolo, with a rate of 279.30 per 1,000. The second highest admission rate was for Camp Stotsenburg, 238.14 per 1,000. The rates for these posts in 1910 was 216.22 and 390.14, respectively. The Department of Mindanao had the highest rate, 146.60 per 1,000, and the Department of the Visayas the lowest, 20.37 per 1,000.

So far as this office has been informed practically very little has been done in the matter of screening. Attempts have been made to screen mess halls and kitchens principally against flies. The authorities still rely on mosquito bars to protect the men. Now that steps are being taken to concentrate the troops in larger posts, it is hoped that the necessary screening can be done, and consequently the malarial rate still further diminished.

UNDETERMINED FEVERS.

The admission rate for these fevers was 6.74 per 1,000 as compared with 10.75 for 1910 and 25.46 for 1909. The various diagnoses under this head are as follows:

Febricula	47
Fevers, simple, continued	23
Fever, type undetermined	12
Ephemeral fever	2
Total cases	84

The rate for this class of fevers in the United States was 2.50.

CHART P.—*Showing (for American troops) the relative admission, death, and noneffective ratios per thousand of mean strength for certain special diseases in the Philippine Islands.*

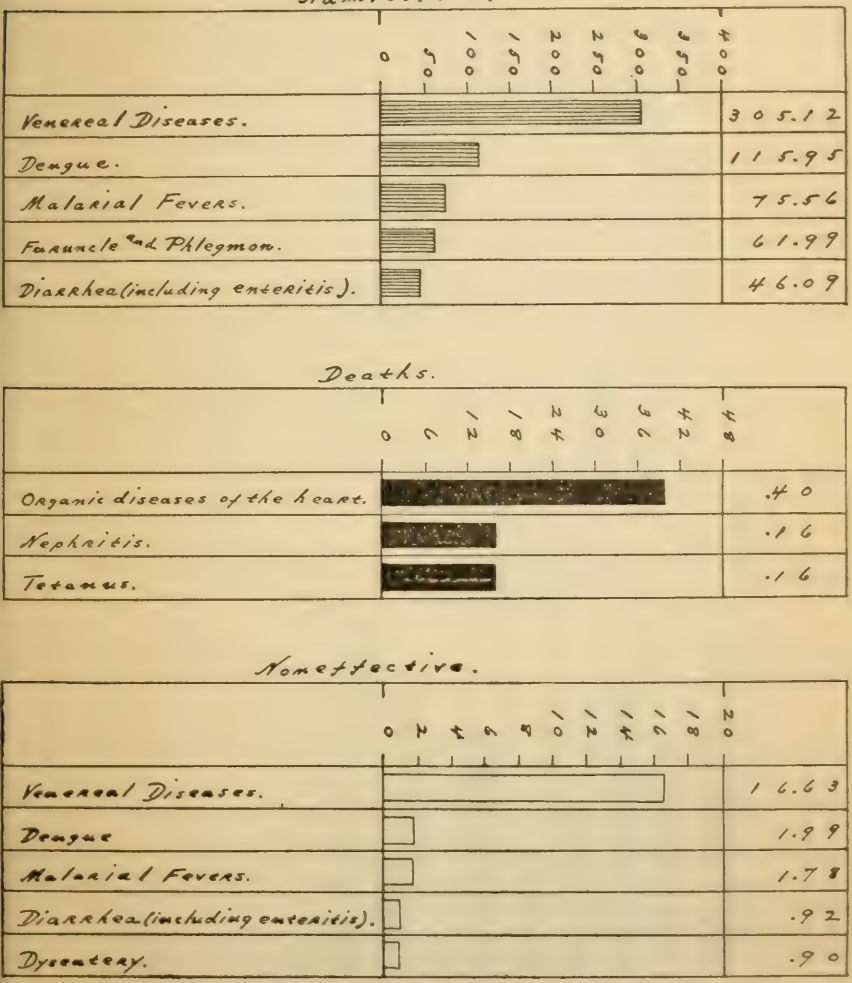
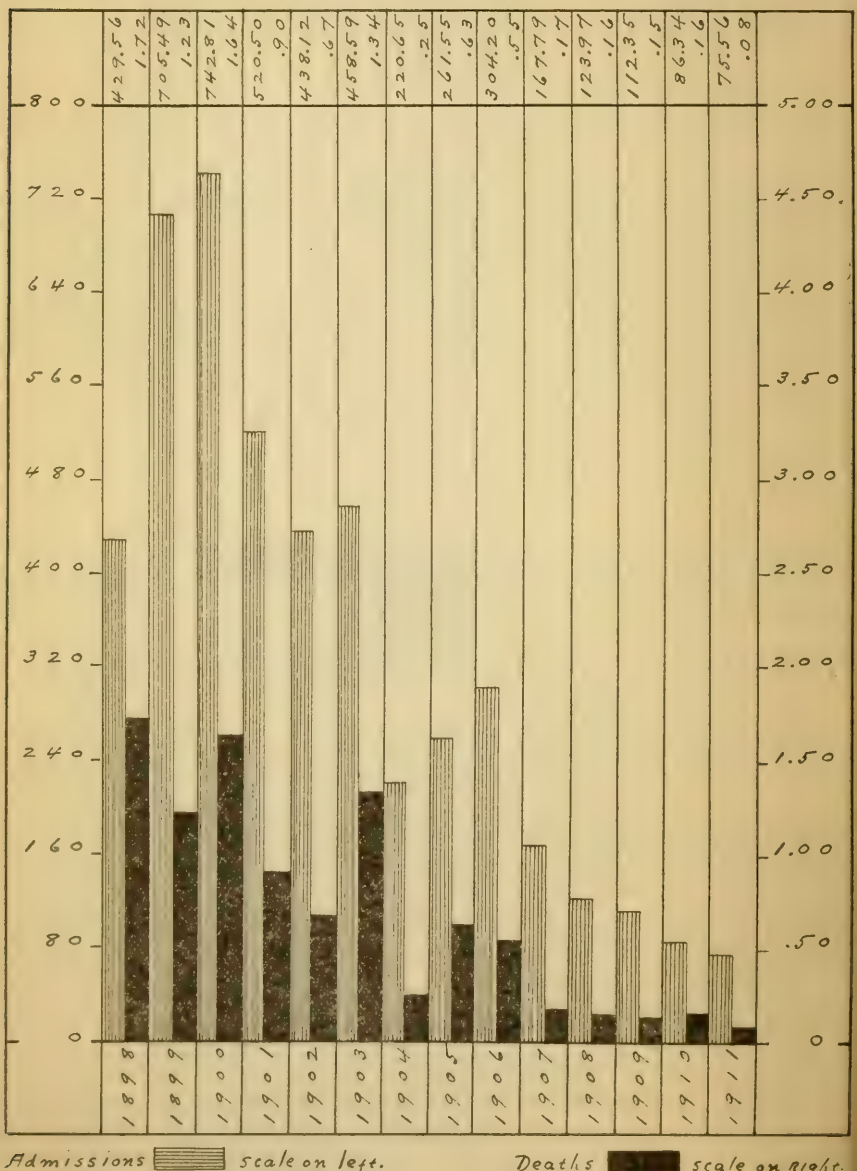


CHART Q.—*Showing (for American troops) the relative admission and death ratios per thousand of mean strength for malarial fevers in the Philippine Islands, years 1898–1911.*



SMALLPOX.

One case of this disease occurred. The patient recovered.

VENEREAL DISEASES.

Venereal diseases still hold first place for both admissions and noneffective rate. Nearly one-third of the total number of admissions for disease were due to venereal diseases. There were 1,726 admissions for gonorrhea, 1,102 for chancroid, and 972 for syphilis. Considerably more than one-third of the total number of days lost in hospital and quarters were for diseases not in line of duty, and were due largely to venereal diseases. Unfortunately the admission rate showed a decided increase, being 305.12 as compared with 275.64 for 1910, 301.85 for 1909, and 289.62 for 1908. The rate for gonorrhea showed a material reduction, while both that for syphilis and chancroids showed quite a considerable increase. The rate for gonorrhea, chancroids, and syphilis was, respectively, for 1911, 138.59, 88.48, and 78.05, and for 1910, 170.07, 60.85, and 44.72. The increase in the rate for syphilis can probably be accounted for by (1) the increased accuracy of diagnosis by the Wassermann reaction, causing the discovery of many latent cases, and (2) by the large number of cases taken on sick report for treatment with salvarsan. The noneffective rates for gonorrhea, chancroid, and syphilis were, respectively, 7.61, 5.02, and 3.99 per 1,000 for 1911, and 10.46, 3.20, and 4.05 for 1910. The total noneffective rate for 1911 was 16.63 and for 1910 it was 17.72. The measures taken for prevention during the year were the same as those outlined in the last report of this office.

TABLE NO. 44.—*Venereal diseases at posts in the Philippines having a mean strength of more than 300 men (principally American troops), year 1911.*

Posts.	Admissions.		Mean strength.
	Total.	Ratio.	
Warwick Barracks	241	514.96	468
Camp Stotsenburg	615	512.07	1,201
Camp Jossman	387	454.76	851
Cuartel de Espana	213	395.18	539
Camp McGrath	229	274.58	834
Fort William McKinley	877	303.77	2,887
Fort Mills[1]	232	133.95	1,732
Augur Barracks	160	156.25	1,024
Camp Keithley[1]	121	116.80	1,036
Ludlow Barracks	51	93.92	543
Pettit Barracks[1]	45	92.21	488

[1] About one-third of the command at (each) Fort Mills, Camp Keithley, and Pettit Barracks were Philippine Scouts.

ALCOHOLISM AND ITS RESULTS.

The admission rate, 28.50, was slightly higher than 28.26 for 1910. The noneffective rate was exactly the same, 0.43 per 1,000. This rate was for white troops, as there were no colored troops in the islands.

CHOLERA.

No case of this disease occurred during the year, nor were any epidemics reported in the vicinity of military posts.

TUBERCULOSIS.

There were 47 cases among the American troops, a ratio of 3.77 per 1,000. These cases were all promptly transferred home, and no deaths occurred there from this disease. In 1910 there were 67 cases, with a rate of 5.46 per 1,000.

BERIBERI.

No case of this disease occurred among the American troops.

DYSENTERY.

The occurrence of this disease shows a marked decrease, being 14.37 per 1,000 as compared with 19.39 for 1910, 43.06 for 1909, and 26.23 for 1908. There were 131 cases of amœbic dysentery, with a rate of 10.52, and 24 cases each of bacillic and other infections with a rate of 1.93. The noneffective rate for all dysentery was 0.90 per 1,000 for 1911 and 1.26 for 1910.

DENGUE.

This disease had the second highest admission and noneffective rate. There were 1,444 cases, with a rate of 115.95 and a noneffective rate of 1.99 as compared with 1,017 admissions in 1910, with an admission rate of 82.84 and noneffective rate of 1.53. There were no deaths or discharges for disability resulting.

INSANITY.

The admission rate was 2.01 per 1,000 as compared with 1.87 for 1910, 1.56 for 1909, and 1.09 for 1908. The rate for the United States was 1.68 per 1,000, or slightly lower.

DIARRHEA AND ENTERITIS.

The admission rate for these diseases shows quite a large decrease, being 46.09 per 1,000 as compared with 74.86 for 1910, 59.79 for 1909, and 85.21 for 1908. The noneffective rate was 0.92 per 1,000 as compared with 1.38 for 1910.

PTOMAINE POISONING.

Several epidemics occurred during the year. There was one epidemic each at Camp Stotsenburg, Cuartel de Espana, and Fort William McKinley, thought to have been due to ice cream. The number of cases were, respectively, 66, 20, and 33. Maj. H. I. Raymond, surgeon at Fort William McKinley, says:

As a result of recommendations of the Medical Department following an epidemic in June, 1910, orders regarding the strict inspection of canned articles have been

in force at this post. While gross changes apparent to the senses will be easily detected, it is no doubt possible that toxic products may be formed in the early stages of deterioration before outward evidence of decomposition becomes marked. The ptomaines causing the present epidemic may have been thus difficult of detection or have been formed after the pudding had been made and set aside over night. It is most probable that one or more cans of spoiled milk escaped detection and thus gained entrance to the food.

TOTAL RATE FOR DISEASE AND EXTERNAL CAUSES.

The total admission rate for all diseases was 1,027.62 per 1,000, which was lower than 1,048.22, the rate for 1910. The total noneffective rate for disease was 37.83 in 1911 and 40.34 in 1910. The total admission rate for external causes was 190.62 as compared with 194.43 for 1910. The noneffective rate for external causes was 5.32 in 1911 and 5.12 in 1910.

INFLUENCE OF STATION.

The Department of the Visayas has the highest noneffective and discharge for disability rates and the highest average number of days treatment for each case. These rates were lowest in the Department of Mindanao. The Department of Luzon has the highest admission rate and the Department of Mindanao the lowest. The Department of Mindanao had the highest rates for deaths and total losses, the Department of the Visayas the lowest death rate, and the Department of Luzon the lowest rate for total losses.

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TABLE No. 45.—*Movement of sick American troops in the Philippines.*

	Mean strength.	Ratio per 1,000 of mean strength.												Average number of days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective from sickness.				From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
										From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.					
		From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
Department of Luzon.....	7,589	1,337.73	758.47	11.20	9.49	4.22	1.19	15.42	10.68	38.08	32.99	17.81	15.74	13.90	10.39	6.50	8.57
Department of the Visayas..	1,620	1,159.26	504.94	12.96	11.73	2.47	2.47	15.43	14.20	41.59	39.66	14.98	13.89	15.18	13.09	5.47	10.83
Department of Mindanao....	3,090	929.77	622.33	9.71	6.80	7.44	1.94	17.15	8.74	30.82	29.99	16.96	16.51	11.25	12.10	6.19	9.95
Philippines Division...	12,454	1,218.24	693.99	11.64	9.72	5.30	1.85	16.94	11.57	43.15	39.58	20.77	19.25	15.75	12.93	7.58	10.92

NOTE.—Division hospital and inter-island transports not included in departments, but are included in the division.

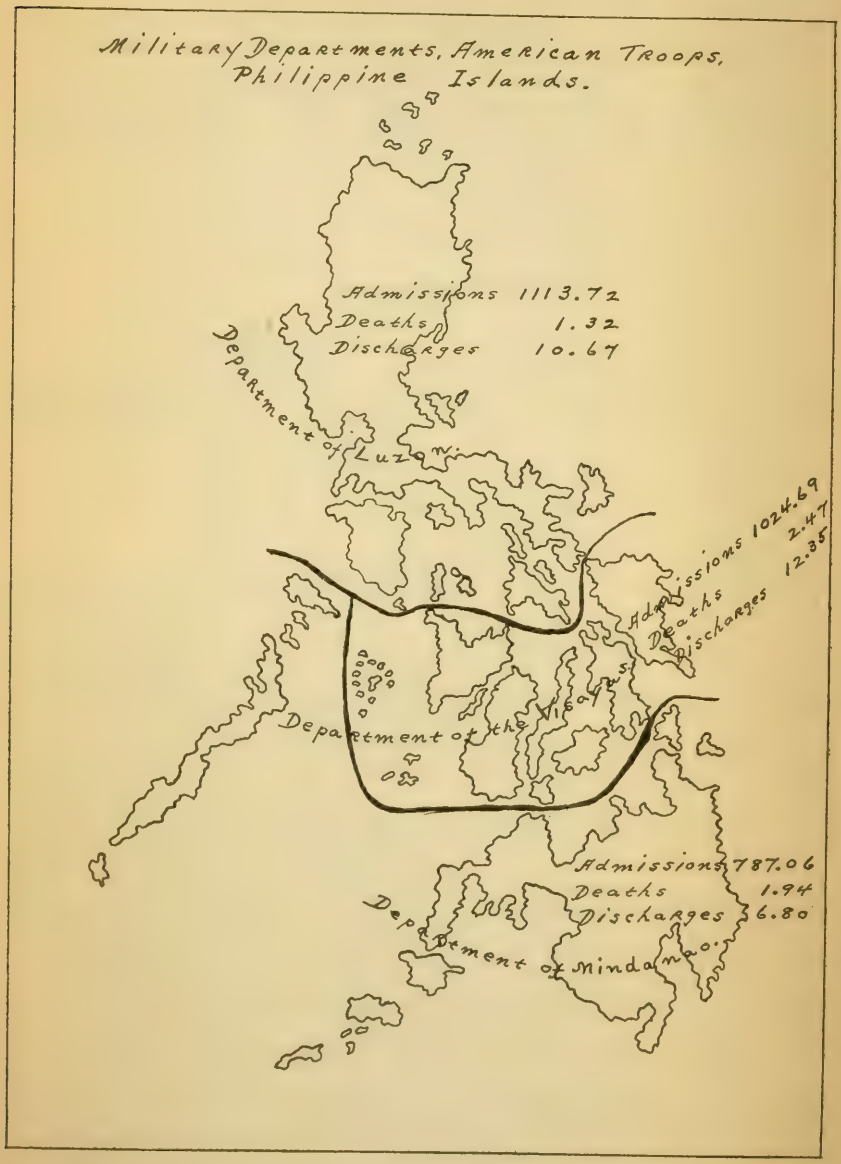
INFLUENCE OF SEASON.

Exclusive of injuries, venereal diseases, alcoholism, and vaccinia, which are not influenced by season, the highest admission rate occurred in July and the second highest in June. The highest noneffective rate was in July and the second highest in June. The highest rate for malarial fevers was in December, and for dengue in July. The lowest admission rate was in February and the lowest noneffective rate was also in February. The highest death rate occurred in August and the lowest in April and September. As the influence of season varies so widely for the different islands, it is hardly possible to obtain any accurate information by comparing the division as a whole.

TABLE NO. 46.—*Influence of season on American troops in the Philippines.*

Months.	Mean strength.	Ratio per 1,000 of mean strength.								Prevailing diseases (exclusive of venereal diseases, etc.).
		All causes.					Exclusive of venereal diseases, alcoholism, vaccinia, and injuries.			
		Admissions.			Noneffective.					
		Total.	Hospital.	Deaths.	Total.	Hospital.	Admissions.	Deaths.	Noneffective.	
January	11,737	89.55	72.16	0.43	39.61	36.37	49.42	0.09	18.96	Malarial fever, 119; dengue, 50; dysentery, 31; furuncle, 31; constipation, 28.
February	12,036	66.30	51.51	.42	34.84	31.80	38.55	.17	17.45	Malarial fever, 82; furuncle, 25; dengue, 23; constipation, 17.
March	11,994	88.54	75.20	.58	39.23	36.54	44.36	.25	17.67	Malarial fever, 55; mumps, 48; tonsillitis, 27; dengue, 22.
April	12,929	86.01	76.65	.39	38.77	35.85	46.87	.08	18.00	Malarial fever, 58; mumps, 55; tonsillitis, 28; furuncle, 27; dyspepsia, 26; constipation, 26.
May	12,155	105.63	93.96	.49	41.33	38.19	58.61	.33	19.35	Malarial fever, 67; furuncles, 40; constipation, 37; dyspepsia, 34; acute bronchitis, 32.
June	11,957	130.72	116.25	.42	50.68	46.54	76.94	.....	24.83	Dengue, 203; malarial fever, 119; furuncles, 60; dyspepsia, 41.
July	12,470	120.77	108.82	.16	47.39	44.22	77.79	.08	25.92	Dengue, 384; furuncles, 51; malarial fever, 38; dyspepsia, 29.
August	12,280	115.80	103.50	.73	47.25	43.38	65.31	.49	23.57	Dengue, 237; furuncles, 55; malarial fever, 49; constipation, 30.
September	12,217	111.73	96.75	.08	47.26	42.84	67.61	.08	24.20	Dengue, 211; furuncles, 61; malarial fever, 50; dyspepsia, 47.
October	12,029	115.97	103.00	.58	46.41	42.44	68.50	.33	23.48	Dengue, 135; furuncles, 69; malarial fever, 58.
November	13,444	91.79	82.64	.30	43.64	39.60	48.87	.....	18.78	Malarial fever, 86; dengue, 65; furuncles, 55, tonsillitis, 36.
December	14,188	97.19	86.27	.70	41.06	37.05	52.79	.....	17.48	Malarial fever, 160; dengue, 43; furuncles, 31; constipation, 25.
Total.	12,454	1,218.24	1,066.08	5.30	43.15	39.58	693.99	1.85	20.77	Dengue, 1,444; malarial fever, 941; diarrhea and enteritis, 574; furuncles, 544.

Military departments in the Philippines, showing for American troops the relative admission, death, and discharge rates for disease.



INFLUENCE OF AGE (DISEASE ONLY).

Excluding injuries the highest noneffective and admission rates were for those under 20 years of age, and the next highest for those 20 to 24. The noneffective and admission rates were lowest for those 50 or over. The death rate was highest for those 45 to 49 years of age. The discharge rate was highest for those 25 to 29 years of age, and lowest for those 50 or over.

LENGTH OF SERVICE (DISEASE ONLY).

Excluding injuries the highest noneffective and admission rates occurred in the first year of service; the second highest noneffective and admission rates in the fourth year; the lowest noneffective and admission in those having ten years or over. The highest discharge rate occurred in the fifth year of service, and the lowest in the fourth. The highest death rate was in those having between five and ten years service, and the lowest for those in the fourth year of service.

TABLE No. 47.—*Influence of disease by age and length of service on American troops in the Philippines.*

	Mean strength.	Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.	Ratio per 1,000 of mean strength.			
						Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.
Length of service:									
1 year and under	2,267	4,160	43	6	155.05	1,835.02	18.97	2.65	68.40
1 to 2 years	1,349	1,445	14	2	51.22	1,071.16	10.38	1.48	37.97
2 to 3 years	2,672	2,270	28	3	84.67	849.55	10.48	1.12	31.69
3 to 4 years	974	1,168	3	.....	41.63	1,199.18	3.08	.....	42.74
4 to 5 years	675	530	9	1	19.56	785.19	13.33	1.48	28.98
5 to 10 years	2,176	1,813	24	6	65.46	833.18	11.03	2.76	30.08
10 years and over	2,341	1,412	10	6	53.52	603.16	4.27	2.56	22.86
Total	12,454	12,798	131	24	471.12	1,027.62	10.52	1.93	37.83
Age:									
19 years and under	407	643	3	1	22.17	1,579.85	7.37	2.46	54.48
20 to 24 years	4,696	6,100	51	5	223.92	1,298.98	10.86	1.06	47.68
25 to 29 years	3,293	3,250	45	7	120.50	986.94	13.67	2.13	36.59
30 to 34 years	1,975	1,541	21	5	57.10	780.26	10.63	2.53	28.91
35 to 39 years	1,094	701	6	3	25.36	640.77	5.48	2.74	23.19
40 to 44 years	644	386	2	2	14.68	599.38	3.11	3.11	22.79
45 to 49 years	265	137	3	1	5.75	516.98	11.32	3.77	21.71
50 years and over	80	40	.....	.....	1.63	500.00	.....	.....	20.34
Total	12,454	12,798	131	24	471.12	1,027.62	10.52	1.93	37.83

CHART R.—*Showing (for American troops), by ages, the relative, noneffective and death ratios per thousand of mean strength for disease in the Philippine Islands for five years, 1907–1911.*

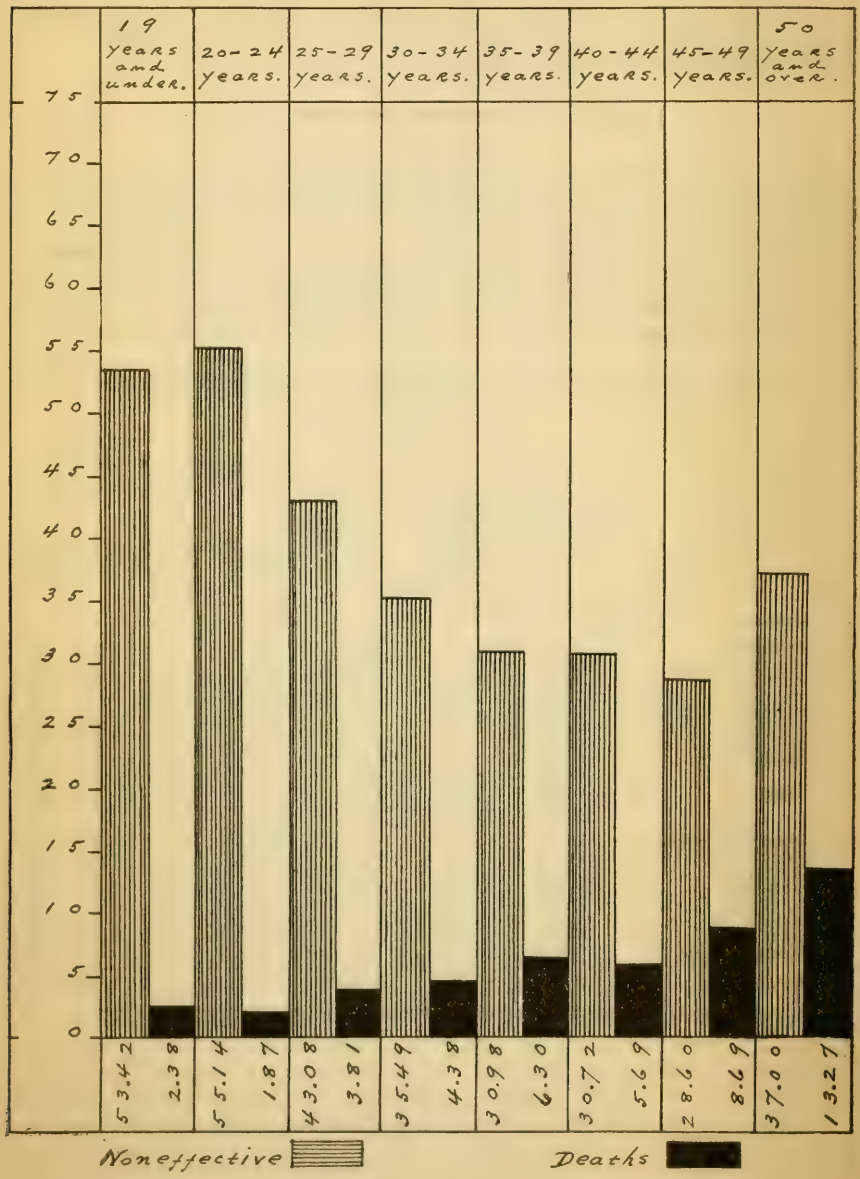


TABLE NO. 48.—*Discharges for disability, American troops in the Philippine Islands.*

Causes of discharge.	Number discharged.	Percentage of discharges for disability.	Discharged for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty
DISEASES.							
General diseases	63	48.09	48	6	9	.....	.....
Tuberculosis (of the lungs, 46; of other organs, 1)	47	35.88	45	2	.....	.....	.....
Venereal diseases	8	6.11	.....	1	7	.....	.....
Secondary syphilis	2	1.53	.....	1	1	.....	.....
Chancroidal ulcers	1	.76	.....	.....	1	.....	.....
Gonorrhea and results (rheumatism, 4; chronic gonorrhea, 1)	5	3.82	.....	.....	5	.....	.....
Chronic alcoholism	2	1.53	.....	2	.....	.....	.....
Exophthalmic goiter	2	1.53	.....	2	.....	.....	.....
Chronic malarial cachexia	1	.76	1	.....	.....	.....	.....
Chronic articular rheumatism	1	.76	1	.....	.....	.....	.....
Diabetes	1	.76	.....	1	.....	.....	.....
Splenomegalic polycythemia	1	.76	1	.....	.....	.....	.....
Diseases of the nervous system	42	32.07	16	25	1	.....	.....
Insanity	22	16.79	10	11	1	.....	.....
Neurasthenia	7	5.34	2	5	.....	.....	.....
Epilepsy	5	3.82	2	3	.....	.....	.....
Chronic sciatica	2	1.53	2	.....	.....	.....	.....
Hysteria	2	1.53	.....	2	.....	.....	.....
Somnambulism	1	.76	.....	1	.....	.....	.....
Angio neurotic edema	1	.76	.....	1	.....	.....	.....
Degeneracy	1	.76	.....	1	.....	.....	.....
Psychopathic constitution	1	.76	.....	1	.....	.....	.....
Congenital malformations and arrested development (mental deficiency, 6; flat feet, 1; stuttering, 1)	8	6.11	.....	8	.....	.....	.....
Diseases of the locomotor system (flat feet, 2; genu varum, 1; polyarthritis, 1; curvature of the spine, 1)	5	3.82	1	4	.....	.....	.....
Diseases of the organs of special sense (all chronic otitis media)	3	2.29	3	.....	.....	.....	.....
Diseases of circulatory system	3	2.29	2	1	.....	.....	.....
Organic disease of the heart	2	1.53	2	.....	.....	.....	.....
Tachycardia	1	.76	.....	1	.....	.....	.....
Diseases of the digestive system	3	2.29	3	.....	.....	.....	.....
Chronic enteritis	1	.76	1	.....	.....	.....	.....
Ventral hernia	1	.76	1	.....	.....	.....	.....
Chronic cirrhosis of the liver	1	.76	1	.....	.....	.....	.....
Diseases of the genito-urinary system	3	2.29	2	1	.....	.....	.....
Chronic interstitial nephritis	2	1.53	2	.....	.....	.....	.....
Enuresis nocturnal	1	.76	.....	1	.....	.....	.....
Diseases of the respiratory system (chronic bronchial asthma)	1	.76	1	.....	.....	.....	.....
Total	131	100.00	76	45	10	.....	.....
EXTERNAL CAUSES.							
Fractures	5	35.71	5	.....	.....	.....	.....
Gunshot wounds	3	21.43	3	.....	.....	.....	.....
Incised wounds	2	14.29	2	.....	.....	.....	.....
Dislocation	1	7.14	1	.....	.....	.....	.....
Lacerated wound	1	7.14	1	.....	.....	.....	.....
Punctured wound of eye	1	7.14	1	.....	.....	.....	.....
Results of injury received prior to enlistment	1	7.14	.....	1	.....	.....	.....
Total	14	100.00	13	1	.....	.....	.....
Total for disease	131	90.34	76	45	10	.....	.....
Total for external causes	14	9.66	13	1	.....	.....	.....
Grand total	145	100.00	89	46	10	.....	.....

American soldiers are very rarely discharged in the Philippine Islands. Cases invalided home and discharged in the United States are credited to the Philippine Islands. These are the cases in the table above. It will be observed that the highest number discharged were for tuberculosis, and the second highest for insanity, the actual number being 47 and 22, and the rates per 1,000 being 3.77 and 1.77. The corresponding rates in the United States were 2.85 and 1.48. This is interesting in view of the general idea that so many Americans become insane in the Tropics.

TABLE No. 49.—*Enlisted men invalided home from the Philippine Islands.*

Causes.	Number of cases.	Percentage of total cases.	Duty.	Discharged on certificate of disability.	Died.	Otherwise disposed of.	Remaining at end of year.
Tuberculosis	[1] 48	24.37	4	24	2	1	17
Insanity	31	15.74	1	18	.....	1	11
Congenital malformations	12	6.09	1	10	.....	.....	1
Epilepsy	9	4.57	.....	5	.....	3	1
Other diseases of the nervous system	8	4.06	.....	5	[2] 1	.....	2
Syphilis	8	4.06	1	4	1	2	.....
Gonorrhea	7	3.55	1	5	.....	.....	1
Neurasthenia	7	3.55	1	5	.....	.....	1
Other fractures, exclusive of gunshot	4	2.03	.....	3	.....	1	.....
Chronic alcoholism	4	2.03	1	2	.....	.....	1
Secondary results of injury	4	2.03	.....	1	.....	.....	3
Chronic articular rheumatism	3	1.52	1	1	.....	.....	1
Exophthalmic goiter	3	1.52	.....	2	.....	.....	1
Organic disease of the heart	3	1.52	.....	2	.....	.....	1
Chronic nephritis	3	1.52	.....	1	.....	.....	2
Other diseases of the bladder (nocturnal enuresis)	3	1.52	.....	1	.....	.....	2
Gunshot wounds	3	1.52	.....	2	.....	.....	1
Diseases of the middle and internal ear (chronic otitis media)	2	1.02	1	1	.....	.....	.....
Chronic enteritis	2	1.02	.....	1	.....	1	.....
Incised wounds	2	1.02	.....	2	.....	.....	.....
Dysentery	1	.51	1	.....	.....	.....	.....
Chancroids	1	.51	.....	1	.....	.....	.....
Diabetes	1	.51	.....	1	.....	.....	.....
Anemia	1	.51	1	.....	.....	.....	.....
Paralysis, without specified cause	1	.51	1	.....	.....	.....	.....
Hypochondriasis	1	.51	1	.....	.....	.....	.....
Neuralgia	1	.51	.....	1	.....	.....	.....
Chronic conjunctivitis	1	.51	.....	.....	.....	.....	1
Retinitis	1	.51	1	.....	.....	.....	.....
Errors of refraction	1	.51	.....	.....	.....	.....	1
Aneurism	1	.51	.....	1	.....	.....	.....
Hemorrhoids	1	.51	1	.....	.....	.....	.....
Functional diseases of the heart (tachycardia)	1	.51	.....	1	.....	.....	.....
Chronic nasal catarrh	1	.51	.....	.....	.....	1	.....
Other diseases of the nasal fossæ (ethmoiditis)	1	.51	.....	.....	.....	.....	1
Goiter	1	.51	.....	.....	.....	.....	1
Chronic bronchitis	1	.51	1	.....	.....	.....	.....
Asthma	1	.51	.....	1	.....	.....	.....
Sprue	1	.51	1	.....	.....	.....	.....
Appendicitis	1	.51	.....	.....	.....	.....	1
Osteomyelitis	1	.51	.....	.....	.....	1	.....
Curvature of the spine	1	.51	.....	1	.....	.....	.....
Arthritis	1	.51	.....	1	.....	.....	.....
Synovitis	1	.51	.....	.....	.....	.....	1
Genu vaxum	1	.51	.....	1	.....	.....	.....
Muscular rheumatism	1	.51	1	.....	.....	.....	.....
Debility following disease	1	.51	.....	.....	.....	.....	1
Dislocation	1	.51	.....	1	.....	.....	.....
Contused wounds	1	.51	.....	1	.....	.....	.....
Lacerated wounds	1	.51	.....	1	.....	.....	.....
Under observation	1	.51	.....	.....	.....	1	.....
Total cases	197	.....	21	107	4	12	53
Percentage of total cases	.....	100.00	10.66	54.31	2.03	6.09	26.90

[1] Forty-seven cases of pulmonary tuberculosis and 1 case of tuberculous caries of the spine.
[2] Died en route (tumor of the cerebellum).

The highest rates for invaliding were for tuberculosis, insanity, and venereal diseases, respectively, 24.37, 15.74, and 8.12 per 1,000. The corresponding rates for 1910 were 25.81, 6.05, and 8.47. Dysenteries, which in 1910 were the cause of the invaliding of 15 men, caused only one such in 1911.

TABLE NO. 50.—*Causes of death, American troops, Philippine Islands.*

Causes of death.	Number of deaths.	Ratio per 1,000 of— Mean strength.	Deaths from disease.
DISEASES.			
Organic disease of the heart	5	0.40	208.33
Tetanus	2	.16	83.33
Malarial fever (malignant tertian)	1	.08	41.67
Dysentary, bacillary	1	.08	41.67
Acute cerebrospinal meningitis	1	.08	41.67
Acute septicemia	1	.08	41.67
Pulmonary tuberculosis	1	.08	41.67
Tertiary syphilis	1	.08	41.67
Sarcoma	1	.08	41.67
Acute leptomeningitis	1	.08	41.67
Cerebral apoplexy	1	.08	41.67
Acute broncho pneumonia	1	.08	41.67
Acute lobar pneumonia	1	.08	41.67
Acute pneumo thorax	1	.08	41.67
Pulmonary abscess	1	.08	41.67
Gastric ulcer	1	.08	41.67
Acute peritonitis result of cholelithiasis	1	.08	41.67
Appendicitis	1	.08	41.67
Acute nephritis	1	.08	41.67
Chronic parenchymatous nephritis	1	.08	41.67
Total	24	1.93	1,000.00
EXTERNAL CAUSES.			
Gunshot wounds (accidental, 3; killed in action, 3; suicidal, 3)	9	.72	214.29
Drowning (accidental, 6; homicidal, 2)	8	.64	190.48
Crushing (by street cars, 3; by falling from high places, 2; by railroad train, 1; by heavy vehicle, 1; struck by speeding motor cycle, 1)	8	.64	190.48
Incised wounds (suicidal, 3; homicidal, 1; killed in action, 1)	5	40	119.05
Fractures (by falling, 3; by diving into shallow water, 2)	5	.40	119.05
Acute poisoning (suicidal by carbolic acid, 2; accidental, 1)	3	.24	71.43
Punctured wounds (homicidal, 1; killed in action, 1)	2	.16	47.62
Contused wound homicidal	1	.08	23.81
Hanging suicidal	1	.08	23.81
Total	42	3.37	1,000.00
Total diseases	24	1.93	363.64
Total external causes	42	3.37	636.36
Grand total	66	5.30	1,000.00

Deaths occurring in the United States from cases invalided home from the Philippine Islands are credited to the Philippine Islands. There were 24 deaths from disease and 42 from external causes with a total of 66 in 1911. In 1910 there was 38 from disease and 26 from external causes, with a total of 64. In 1911 five men were killed in action. There were two killed in action in 1910. There were nine suicides and five homicides in 1911, as compared with three suicides and two homicides in 1910.

PHILIPPINE SCOUTS.

The following table shows the amount of sick for the year:

TABLE No. 51.—*Movement of sick, Philippine Scouts, year 1911.*

	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
	Total.	In hospital.	Total.	In hospital.
Ratio per 1,000 of mean strength:				
Admissions to sick report	744.78	647.36	606.91	.....
Discharges on certificate of disability	4.94	.....	4.37	.....
Deaths	4.56	.....	3.23	.....
Total losses	9.50	.....	7.60	.....
Noneffective	19.86	18.12	14.05	12.86
Average number of days lost:				
For each soldier	7.25	6.61	5.13	4.69
For each case	9.73	10.22	8.45	.....

The continued absence of beriberi from among the scouts, a disease which in 1909 caused 41 per cent of the total loss, is a gratifying triumph of preventive medicine. This is fully described under special diseases and is illustrated by charts.

The admission rate is less than for the preceding year, being 744.78 as compared with 876.10. The total loss is also lower, being 9.5, as compared with 11.13 for 1910, and with 21.84 for 1909. The noneffective rate is lower than for last year, being 19.86 as compared with 26.01 for 1910 and 35.11 for 1909. In the total losses the death rate was higher, being 4.56 as compared with 4.34, but the discharge rate was lower being 4.94 as compared with 6.79. The admission rate for malarial fever is 242.12 as compared with 243.47; dysentery, 7.79 as compared with 10.01; venereal diseases, 58.11 as compared with 62.05; diarrhea and enteritis, 20.89 as compared with 29.84; beriberi, 0.57 as compared with 11 in 1910 and 103.93 in 1909; Asiatic cholera, .00 as compared with 0.20; and tuberculosis (all), 3.23 as compared with 3.34. The rate of deaths from disease was lower, being 3.23 as compared with 3.58, but the rate for external causes was higher, being 1.33 as compared with 0.75.

TABLE No. 52.—*Causes of death among Philippine Scouts, year 1911.*

Causes of death.	Number of deaths.	Ratio per 1,000 of—	
		Mean strength.	Total deaths.
DISEASES.			
Malarial fever (estivo autumnal, 2; pernicious cachexia, 1)	3	0.57	176.47
Organic heart disease	3	.57	176.47
Tuberculosis (of the lungs, 1; of other organs, 1)	2	.38	117.65
Pneumonia (lobar)	2	.38	117.65
Acute cerebrospinal meningitis	1	.19	58.82
Beriberi	1	.19	58.82
Sprue	1	.19	58.82
Hepatic abscess	1	.19	58.82
Cholecystitis, acute	1	.19	58.82
Appendicitis	1	.19	58.82
Carbuncle	1	.19	58.82
Total	17	3.23	1,000.00

TABLE NO. 52.—*Causes of death among Philippine Scouts, year 1911*—Continued.

Causes of death.	Number of deaths.	Ratio per 1,000 of— Mean strength.	Total deaths.
EXTERNAL CAUSES.			
Gunshot wounds (accident, 2; suicide, 2; homicide, 1)	5	.95	714.29
Accidental drowning	2	0.38	285.71
Total	7	1.33	1,000.00
Total diseases	17	3.23	708.33
Total external causes	7	1.33	291.67
Grand total	24	4.56	1,000.00

The principal differences from the preceding year were 2 deaths from tuberculosis as compared with 5; organic heart disease 3 as compared with none; beriberi 1 as compared with 2. There were 3 deaths from malarial fevers as in the preceding year. The death rate for diseases was 3.23 as compared with 3.58 for 1910, the actual number being 17 as compared with 19. There were 7 deaths from external causes as compared with 4 in 1910. This makes the total number of deaths 24 as compared with 23, and a rate per 1,000 of 4.56 as compared with 4.34.

TABLE NO. 53.—*Causes of discharge for disability, Philippine Scouts, year 1911.*

Causes of discharge.	Number discharged.	Percentage of discharges for disease.	In line of duty.	Not in line of duty. Contracted before enlistment.	Not in line of duty. Contracted after enlistment.
DISEASES.					
Pulmonary tuberculosis	11	47.83	11	.....	.....
Insanity	5	21.74	1	4	.....
Leprosy	2	8.70	.....	2	.....
Optic atrophy	1	4.35	1	.....	.....
Neuritis, retrobulbar	1	4.35	.....	1	.....
Filariasis	1	4.35	.....	1	.....
Flat feet, congenital	1	4.35	.....	1	.....
Feeble mindedness, congenital	1	4.35	.....	1	.....
Total	23	100.00	13	10	.....
EXTERNAL CAUSES.					
Fracture (accidental)	1	33.33	1	.....	.....
Lacerated wound (accidental)	1	33.33	.....	.....	1
Penetrating wound, elbow	1	33.33	1	.....	.....
Total	3	100.00	2	.....	1
Total diseases	23	88.46	13	10	.....
Total external causes	3	11.54	2	.....	1
Grand total	26	100.00	15	10	1

The most notable differences in this table from the preceding year are 11 discharges for tuberculosis as compared with 15 in 1910; 5 for insanity as compared with 1; 2 for leprosy as compared with none;

and none for nephritis as compared with 4. There was not a single discharge for beriberi in 1911, as compared with 2 in 1910, and 33 in 1909. The total number discharged for diseases was 23 in 1911, as compared with 32 for 1910, the rate being 4.37 as compared with 6.04. The total number of discharges was 26 as compared with 36, the rate being 4.94 as compared with 6.79.

INFLUENCE OF SEASON.

The following table shows the influence of season:

TABLE No. 54.—*Influence of season on Philippine Scouts, year 1911.*

	Mean strength.	Ratios per 1,000 of mean strength.								Prevailing diseases (exclusive of venereal diseases, etc.).
		All causes.					Exclusive of venereal diseases, alcoholism, vaccinia, and injuries.			
		Admissions.		Deaths.	Noneffective.		Admissions.	Deaths.	Noneffective.	
		Total.	Hospital.		Total.	Hospital.				
Jan	4,951	81.80	68.27	0.20	23.92	21.10	69.48	0.20	18.56	Malarial fever, 122; intestinal parasites, 53; constipation, 25.
Feb	4,930	85.19	69.98	.20	23.99	21.57	72.01	.20	17.57	Intestinal parasites, 99; malarial fever, 88; constipation, 21.
Mar	5,479	52.75	47.45	.37	18.94	17.72	41.07	.....	13.28	Malarial fever, 73; dengue, 32; constipation, 13.
Apr	5,611	36.89	31.72	.53	15.17	14.10	31.01	.18	10.38	Malarial fever, 71; intestinal parasites, 11.
May	5,444	51.25	41.70	.18	17.56	16.03	38.21	.18	11.43	Malarial fever, 81; constipation 14; furuncle, 11.
June	5,382	58.34	49.05	.56	19.50	17.54	48.68	.56	13.49	Malarial fever, 127; constipation, 24; intestinal parasites, 11.
July	5,344	64.18	51.83	.56	19.59	17.66	50.71	.19	12.83	Malarial fever, 126; furuncle, 15; diarrhea, 15; abscess, 15; constipation, 14.
Aug	5,327	81.10	76.03	.....	21.94	20.40	69.65	.....	16.30	Malarial fever, 165; constipation, 22; diarrhea, 17; furuncle, 16.
Sept	5,259	49.63	45.45	.19	18.63	17.20	39.36	.19	13.20	Malarial fever, 64; constipation, 19; dengue, 14; acute bronchitis, 14.
Oct	5,090	74.66	66.01	.98	21.67	19.44	61.10	.79	16.11	Malarial fever, 130; constipation, 33; acute bronchitis, 13.
Nov	5,107	56.98	50.71	.39	19.51	17.94	46.80	.39	13.68	Malarial fever, 116; constipation, 20; dyspepsia, 11.
Dec	5,274	57.07	53.28	.38	18.89	17.56	43.42	.38	12.76	Malarial fever, 112; constipation, 18; dyspepsia, 12.
Total	5,266	744.78	647.36	4.56	19.86	18.12	606.91	3.23	14.05	Malarial fever, 1,275; constipation, 230; intestinal parasites, 218.

Excluding injuries, venereal diseases, alcoholism, and vaccinia, over which causes of admission the seasons have little or no influence, the highest admission rate is in February and the lowest in April, the highest constant noneffective rate in April and the lowest in May. The highest rate for malarial fevers was in August; for American troops it was in December.

RECRUITING.

The following is from General Order No. 1, Headquarters Philippines Division, Manila, P. I., January 1, 1910:

The physical examination of recruits for the Philippine Scouts will be conducted in accordance with the authorized manual for the examination of recruits, except as hereinafter specified. It will include examination for filarial disease, and any applicant afflicted therewith will be rejected.

No recruit for the Scouts will be accepted for enlistment who is under 59 inches in height or 100 pounds in weight.

The following table will be used in determining the minimum allowable weight and chest measurements relative to height:

Table of physical proportions for height, weight, and chest measurements.

Height.		Weight.	Chest measurement (at expiration).
Ft.	*in.*	*Pounds.*	*Inches.*
4	59	100	28½
5	60	101	28¾
5 1/12	61	102	29
5 2/12	62	103	29¼
5 3/12	63	105	29½
5 4/12	64	107	29¾
5 5/12	65	110	30
5 6/12	66	113	30¼
5 7/12	67	118	30½
5 8/12	68	124	30¾
5 9/12	69	127	31
5 10/12	70	130	31¼

Chest measurement at expiration should be taken under conditions of normal respiratory effort. Chest mobility and measurement at inspiration will be taken, but will not be used as data for rejection of a candidate for enlistment, unless they are such as to indicate abnormality or pathological conditions.

In the case of an especially desirable applicant who is active, has firm muscles, and is evidently vigorous and healthy, who varies from the established standard, special authority for the enlistment may be requested from these headquarters.

The results of the examinations of applicants for enlistment in the Philippine Scouts are given in the following table and are of interest as showing the anthropometrical characteristics of the Filipino races. The proportion of recruits accepted to those examined was lower in 1911 than in 1910, being 96.1 per cent as compared with 97.6. The total number examined in 1911 was 2,296 as compared with 1,962 for 1910.

TABLE No. 55.—*Examination of Filipino applicants for enlistment during year 1911.*

	Number.	Ratio per 1,000 examined.
Examined by medical officers	2,296	1,000.00
Accepted by medical officers	2,207	961.24
By first enlistment	634	276.13
Other enlistments	1,573	685.10
Rejected by medical officers	70	30.49
Declined	19	8.28

TABLE No. 56.—*Filipino recruits (accepted).*

	Number.	Ratio.		Number.	Ratio.
18 years and under	33	14.95	31 years	111	50.29
19 years	40	18.12	32 years	70	31.72
20 years	27	12.23	33 years	41	18.58
21 years	187	84.73	34 years	43	19.48
22 years	98	44.40	35 years	21	9.52
23 years	71	32.17	36 years	22	9.97
24 years	350	158.59	37 years	14	6.34
25 years	198	89.71	38 years	9	4.08
26 years	125	56.64	39 years	6	2.72
27 years	238	107.84	40 years and over	12	5.44
28 years	189	85.64			
29 years	154	69.77	Total	2,207	1,000.00
30 years	148	67.06			

Forty-five and five-tenths per cent were 25 years of age or under.

Table No. 57 shows the height of recruits and the relation of height to age.

TABLE No. 57.—*Filipino recruits—relation of height to age.*

ABSOLUTE NUMBERS.

Height.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
4 feet 11 inches	1			1			3	1	11	17
5 feet	1	2	1	12	5	3	14	10	40	88
5 feet 1 inch	1		1	22	11	5	28	18	95	181
5 feet 2 inches	8	3	5	37	15	10	50	35	180	343
5 feet 3 inches	7	11	10	36	31	14	73	45	243	470
5 feet 4 inches	4	10	1	27	15	12	78	33	246	426
5 feet 5 inches	5	6	5	24	9	9	44	31	169	302
5 feet 6 inches	5	8	1	17	4	10	37	16	121	219
5 feet 7 inches	1			8	6	3	15	5	63	101
5 feet 8 inches			2	1	1	4	5	3	21	37
5 feet 9 inches				2		1	1	1	9	14
5 feet 10 inches			1		1		1		3	6
5 feet 11 inches and over							1		2	3
Total	33	40	27	187	98	71	350	198	1,203	2,207

PROPORTIONATE NUMBERS.

4 feet 11 inches	30.30			5.35			8.57	5.05	9.14	7.70
5 feet	30.30	50.00	37.04	64.17	51.02	42.25	40.00	50.50	33.25	39.87
5 feet 1 inch	30.30		37.04	117.65	112.25	70.42	80.00	90.91	78.97	82.01
5 feet 2 inches	242.42	75.00	185.19	197.86	153.05	140.85	142.86	176.76	149.63	155.41
5 feet 3 inches	212.12	275.00	370.37	192.51	316.33	197.18	208.57	227.27	202.00	212.96
5 feet 4 inches	121.21	250.00	37.04	144.38	153.05	169.01	222.86	166.66	204.50	193.02
5 feet 5 inches	151.52	150.00	185.19	128.34	91.84	126.76	125.71	156.58	140.38	136.84
5 feet 6 inches	151.52	200.00	37.04	90.91	40.82	140.85	105.71	80.82	100.58	99.22
5 feet 7 inches	30.30			42.78	61.22	42.25	42.86	25.25	52.37	45.76
5 feet 8 inches			74.07	5.35	10.20	56.34	14.29	15.15	17.46	16.76
5 feet 9 inches				10.70		140.85	2.86	5.05	7.48	6.34
5 feet 10 inches			37.04		10.20		2.86		2.49	2.72
5 feet 11 inches and over							2.86		1.66	1.36
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

Forty-nine and eight-tenths per cent of all recruits were 5 feet 3 inches or less, which is below the minimum standard for American soldiers. Two and seven-tenths were above the average height of American recruits.

Table No. 58 exhibits the weight of the Filipino recruits and the relation of weight to age.

TABLE No. 58.—*Filipino recruits—relation of weight to age.*

ABSOLUTE NUMBERS.

Weight.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
99 pounds and under.	1	.....	.....	.....	.....	2	5	1	15	24
100 to 104 pounds....	6	5	3	18	9	3	27	20	85	176
105 to 109 pounds....	9	10	6	24	14	8	50	23	160	304
110 to 114 pounds....	6	7	5	49	18	16	67	38	211	417
115 to 119 pounds....	4	7	4	32	21	18	70	37	222	415
120 to 124 pounds....	4	4	3	34	21	9	54	34	201	364
125 to 129 pounds....	2	6	4	20	9	4	41	26	123	235
130 to 134 pounds....	1	.....	1	4	3	3	20	12	97	141
135 to 139 pounds....	.....	1	.....	4	1	4	11	4	44	69
140 to 144 pounds....	.....	.....	1	2	.....	1	3	.....	25	32
145 to 149 pounds....	.....	.....	.....	.....	2	1	.....	1	11	15
150 to 154 pounds....	.....	.....	.....	.....	.....	2	2	1	3	8
155 to 159 pounds....	.....	.....	.....	.....	.....	.....	.....	1	3	4
160 pounds and over.	.....	.....	.....	.....	.....	.....	.....	.....	3	3
Total.....	33	40	27	187	98	71	350	198	1,203	2,207

PROPORTIONATE NUMBERS.

99 pounds and under.	30.30	.....	.....	.....	.....	28.17	14.29	5.05	12.50	10.87
100 to 104 pounds....	181.82	125.00	111.11	96.26	91.84	42.25	77.14	101.02	70.66	79.75
105 to 109 pounds....	272.73	250.00	222.22	128.34	142.86	112.68	142.86	116.16	133.00	137.75
110 to 114 pounds....	181.82	175.00	185.19	262.03	183.67	225.36	191.43	191.91	175.39	188.95
115 to 119 pounds....	121.21	175.00	148.15	171.12	214.29	253.52	200.00	186.87	184.54	188.05
120 to 124 pounds....	121.21	100.00	111.11	181.82	214.29	126.76	154.29	171.72	167.08	164.93
125 to 129 pounds....	60.61	150.00	148.15	106.95	91.84	56.34	117.14	131.31	102.24	106.48
130 to 134 pounds....	30.30	.....	37.04	21.39	30.61	42.25	57.14	60.61	80.63	63.89
135 to 139 pounds....	.....	25.00	.....	21.39	10.20	56.34	31.43	20.20	36.57	31.26
140 to 144 pounds....	.....	.....	37.04	10.70	.....	14.08	8.57	.....	20.78	14.50
145 to 149 pounds....	.....	.....	.....	.....	20.41	14.08	.....	5.05	9.14	6.80
150 to 154 pounds....	.....	.....	.....	.....	.....	28.17	5.71	5.05	2.49	3.62
155 to 159 pounds....	.....	.....	.....	.....	.....	.....	.....	5.05	2.49	1.81
160 pounds and over.	.....	.....	.....	.....	.....	.....	.....	.....	2.49	1.36
Total.....	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

It will be observed that the weight of 87.7 per cent of all recruits is 128 pounds or under, the minimum standard for American recruits. Only 1.4 per cent were the average weight of American recruits or above the average weight.

Table No. 59 shows the chest measurements of recruits and the relation of chest measurement to age.

TABLE No. 59.—*Filipino recruits—Relation of chest measurement to age.*

ABSOLUTE NUMBERS.

Chest measurement.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
26 inches and under							1			1
27 inches	1				1		1		6	9
28 inches	1	1		1			10	3	13	29
29 inches	2	5	3	2	6	6	21	9	68	122
30 inches	10	9	4	61	20	13	67	40	190	414
31 inches	7	11	11	47	15	13	94	44	292	534
32 inches	10	6	6	47	30	17	82	56	306	560
33 inches	2	6	2	23	15	14	51	31	198	342
34 inches		2		5	9	6	17	10	93	142
35 inches			1	1	1	1	5	4	27	40
36 inches and over					1	1	1	1	10	14
Total	33	40	27	187	98	71	350	198	1,203	2,207

PROPORTIONATE NUMBERS.

26 inches and under							2.86			0.45
27 inches	30.30				10.20		2.86		4.98	4.08
28 inches	30.30	25.00		5.35			28.57	15.15	10.81	13.14
29 inches	60.61	125.00	111.11	10.70	61.22	84.51	60.00	45.46	56.52	55.28
30 inches	303.03	225.00	148.15	326.20	204.08	183.10	191.43	202.00	157.94	187.58
31 inches	212.12	275.00	407.41	251.33	153.06	183.10	268.57	222.22	242.73	241.95
32 inches	303.03	150.00	222.22	251.33	306.12	239.44	234.29	282.83	254.36	253.75
33 inches	60.61	150.00	74.07	122.99	153.06	197.18	145.71	156.58	164.60	154.96
34 inches		50.00		26.74	91.84	84.51	48.57	50.51	77.31	64.34
35 inches			37.04	5.35	10.20	14.08	14.29	20.20	22.44	18.12
36 inches and over					10.20	14.08	2.86	5.05	8.31	6.34
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

The minimum standard chest measure for American recruits is 32 inches at expiration. Fifty and two-tenths per cent of all Filipino recruits have a chest measurement below this standard.

Table No. 60 gives the causes for rejection among the 2,296 applicants for enlistment examined by medical officers during the year.

TABLE No. 60.—*Causes of rejection of Filipino applicants for enlistment, year 1911.*

	Total.			Total.	
	Number.	Ratio per 1,000 rejected for all causes.		Number.	Ratio per 1,000 rejected for all causes.
Diseases of the digestive system	11	157.14	Defects of vision	3	42.86
Venereal diseases	10	142.86	Flat feet	3	42.86
Underweight	9	128.57	Curvature of the spine	2	28.57
Tuberculosis	5	71.43	Diseases of the skin	2	28.57
Chest development, insufficient	4	57.14	Hernia	2	28.57
Diseases of the genito-urinary system	4	57.14	Other physical causes (1 each)	9	128.61
			Causes not physical	6	85.71
			Total	70	1,000.00

Eleven were rejected for diseases of the digestive system and 10 for venereal diseases. Although the standard for weight is low, 9 were rejected for underweight. In 1910 only 1 was rejected for tuberculosis, but in 1911 there were 5.

SPECIAL DISEASES, PHILIPPINE SCOUTS.

TYPHOID FEVER.

Twelve cases of this disease occurred among the native troops without a death. On page 50 will be found a table giving the date and place of occurrence. As pointed out under the discussion of this disease for American troops, United States, very few, if any, of the scouts had been immunized against typhoid by the use of the prophylactic prior to the present year. None of the cases in question had been immunized.

The two cases at Florida Blanca in February and the four at Cotabato in October were infected while in the field. As will be noticed, the others were all sporadic.

MALARIAL FEVERS.

The admission rate for all fevers of this class was 242.12, as compared with 243.47 in 1910. The cause that lessens the venereal rate among the native troops operates in like manner to increase the malarial rate. The majority of them being married, sleep to a greater or less extent outside of the barracks, and hence without the protection of their mosquito bars.

VENEREAL DISEASES.

This class of disease constitutes the second cause of admission among these troops. The noneffective rate was 3.63 per 1,000 and admission rate 58.11 per 1,000, as compared with 3.91 and 62.05 for 1910. There were 243 admissions for gonorrhea, 35 for chancroids, and 28 for syphilis in 1911, as compared with 265, 29, and 22, respectively, for 1910. These diseases caused about one-eleventh of the total number of admissions for disease, while among the American troops in the Philippines they caused a little less than one-third of the total number of admissions for disease. The good showing of the native is, to a large extent, due to the fact that a large percentage of them are married.

SMALLPOX.

There were 11 cases of this disease. These cases were all sporadic. At only two posts were there more than one case. Two cases occurred at Cotabato—one in January and one in February—and two at Camp Bumpus—one in May and one in November. No discharge or death resulted from any of the 11 cases.

CHOLERA.

No case of this disease occurred during the year.

TUBERCULOSIS.

There were 17 cases of this disease, the admission rate being 3.23 per 1,000. There were 2 deaths and 11 discharges.

DYSENTERIES.

The admission rate was 7.79, as compared with 10.01 for 1910 and 5.90 for 1909. There were 41 cases, 30 of them being amœbic.

DENGUE.

The admission rate was 15.38 and noneffective rate 0.31 per 1,000, as compared with 18.06 and 0.38 for 1910. The admission and noneffective rates for American troops for this disease in the Philippine Islands were 115.95 and 1.99 per 1,000.

DIARRHEA AND ENTERITIS.

The admission rate was 20.89, as compared with 29.84 for 1910.

ALCOHOLISM AND RESULTS.

For the native troops the admission rate was 0.76 and the noneffective rate was 0.004 per 1,000, while for the white troops the rates were, respectively, 28.50 and 0.43.

BERIBERI.

In the last report it was pointed out that this disease had practically disappeared from among the native troops, as a result in the change in diet, following the recommendation of the tropical board. Only three cases occurred in 1911, one each in January, July, and September. The admission, noneffective, death, and discharge rates for 1911 were, respectively, 0.57, 0.12, 0.19, and 0.00 per 1,000, as compared with 11, 1.66, 0.38, and 0.38 for 1910 and 103.93, 11.96, 2.17, and 5.96 for 1909. The practical disappearance of this disease is shown graphically by Chart S.

SURGICAL OPERATIONS.

One hundred and seventy-four operations were performed upon Filipino scouts, 171 of which were successful. There was one death from carbuncle. The anesthetic used was chloroform in 11 cases, ether in 24, and local anesthetic in 49. No anesthetic was required in 90 operations.

CHART 8.—*Showing (for Filipino Scouts) the relative admission, death, and discharge ratios per thousand of mean strength, by years, since 1902, for beriberi.*

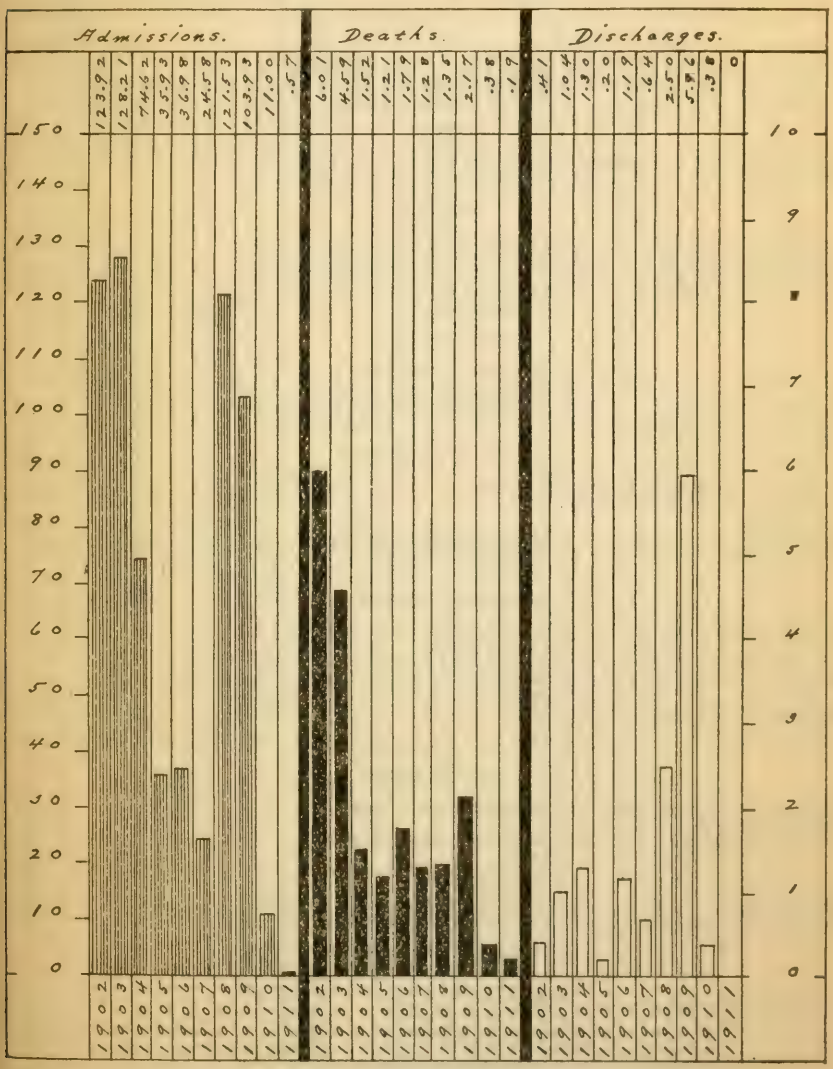


TABLE No. 61.—*Surgical operations performed on Filipino troops, 1911.*

Operation.	Disease or injury.	Number of cases.	Result.				Anesthetic.			
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Local.	None.
	EYE.									
Excision	Pterygium	2	2						2	
Do	Meibomian cyst	5	5						5	
Do	Dermoid cyst	1	1						1	
	THORAX.									
Resection sixth rib and drainage	Pulmonary abscess	1	1					1		
Thoracentesis	Hemothorax	1	1							1
	ABDOMEN.									
Appendectomy	Appendicitis	3	3					3		
Bassini's operation, 2; Andrews's modified operation, 1.	Inguinal hernia	3	3					3		
Exploratory laparotomy	Tubercular adenitis, mesenteric glands.	1			1			1		
	ANUS AND RECTUM.									
Excision	Redundant mucous fold of rectum.	1	1					1		
Incision and drainage	Ischio-rectal abscess	2	2				2			
Incision, 1; Allingham's operation, 1; excision and ligation, 1.	Hemorrhoids	3	3				2			1
	GENITO-URINARY SYSTEM.									
Allingham's operation, 1; Andrews's operation, 1; Jaboulay's operation, 1.	Hydrocele	3	3					3		
Curetment	Abscess of testicle	1	1							1
Circumcision	Phimosis, 4; redundant prepuce, 1.	5	5						5	
	SKIN AND CELLULAR TISSUE.									
Excision of connecting web	Syndactylism third and fourth fingers.	1	1					1		
Agnew's operation, 1; excision, 5	Ingrowing toe nail	6	6						4	2
Incision and drainage	Carbuncle	4	3			1	3			1
Do	Cellulitis	5	5						1	4
Incision and drainage, 58; incision and curetment, 9.	Abscess	67	67						14	53
Curetment	Ulcer	1	1						1	
	LYMPHATIC GLANDS.									
Incision and curetment, 1; incision and drainage, 16.	Adenitis inguinal, venereal	17	17					7	7	3
Incision and drainage	Adenitis inguinal, nonvenereal.	3	3						1	2
Do	Adenitis ileo-pelvic, retroperitoneal.	1	1					1		
Adenectomy	Adenitis cervical	1	1				1			
Incision and curetment	Lymphadenitis, tubercular	1		1			1			
	MUSCLES, TENDONS, FASCIÆ LIGAMENTS, AND BURSÆ.									
Incision and drainage	Bursitis	1	1						1	
	BONES.									
Removal of dead bone	Necrosis shaft of humerus	1	1					1		
Incision and drainage	Periostitis of finger	1	1							1
	AMPUTATIONS.									
Amputation, arm, site not stated	Gunshot wound, shattering humerus.	1	1					1		
Amputation, hand	Explosion of dynamite	1	1							1
Do	Lacerated wound	1	1						1	
	FOREIGN BODIES.									
Extraction	Bullet, 1; jacket of bullet, 1.	2	2				1		1	

TABLE No. 61.—*Surgical operations performed on Filipino troops, 1911*—Continued.

Operation.	Disease or injury.	Number of cases.	Result.				Anesthetic.			
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Local.	None.
	TUMORS.									
Excision	Cyst	1	1	....	....	....	....	....	1	....
Do	Sebaceous cyst	2	2	....	....	....	1	1	....	....
	PLASTIC SURGERY.									
Excision and skin grafting	Scar of cheek	1	1	....	....	....	....	....	1	....
Plastic operation	Lacerated wound of mouth and gums.	1	1	....	....	....	....	....	1	....
	MISCELLANEOUS.									
Excision	Wound, poisoned, by stinger of ray fish.	1	1	....	....	....	....	....	....	1
Incision and drainage	Scorpion sting	2	2	....	....	....	....	....	2	....
Suturing	Incised and lacerated wounds	19	19	....	....	....	....	....	....	19
Total number of cases		174	171	1	1	1	11	24	49	90

PREVALENCE OF DISEASES, BY RACES, IN THE PHILLIPPINES.

In making this comparison, it is to be borne in mind that the native troops were serving in their own country under conditions natural to them, but inimical to our troops.

The admissions and constant noneffective rates were much lower for the Filipino than for American troops serving in the Philippines, the admission rate for American troops being 1,218.24, and for Filipino 744.78. The noneffective rate for the American troops was 43.15, and for the Filipino 19.86. The death and discharge rates for the Filipino troops were also lower than for American, the death rate for the former being 4.56, and for the latter 5.30, while the discharge rate for the former was 4.94, and for the latter 11.64.

TABLE No. 62.—*Important diseases by races, Philippine Islands.*

Diseases.	Admission rates.		Diseases.	Admission rates.	
	American troops, white only.	Filipino troops.		American troops, white only.	Filipino troops.
Venereal diseases	305.12	58.11	Hemorrhoids	7.07	0.57
Dengue	115.95	15.38	Tuberculosis	3.77	3.23
Diarrhea and enteritis	46.09	20.89	Malaria	75.56	242.12
Furunculosis	43.68	22.60	Intestinal parasites	5.86	41.40
Alcoholism	28.50	.76	Bronchitis, acute and chronic	21.20	21.65
Dyspepsia	23.37	16.90	Dhobie itch	10.12	18.04
Tonsillitis	21.04	2.85	Conjunctivitis	5.94	7.22
Muscular rheumatism and myalgia	15.98	5.51	Typhoid fever	.96	2.28
Dysentery	14.37	7.79	Pneumonia	.40	1.52
Appendicitis	7.95	.57	Influenza	.32	.95
Articular rheumatism, acute and chronic	7.31	4.56	Beriberi	....	.57

SANITATION IN THE PHILIPPINE ISLANDS.

The chief surgeon reports that sanitation and general sanitary conditions throughout the division were good during the year, and that little sickness at posts could be attributed to unhygienic conditions. A certain amount of sickness has, however, he states resulted from field service.

In his December sanitary report, the surgeon at Augur Barracks, Jolo, remarks as follows:

> Malarial and dengue fevers and amebic dysentery have been the prevailing diseases during the month. Owing to the fact that the troops were in the field, and often all night in trenches and on outposts, preventive measures against mosquito-borne diseases were practically impossible. Mosquito bars were used when possible, and the quinine prophylatic was administered. In marching for several hours under the tropical sun the men drank unboiled water in spite of regulations against it. Boiled water was supplied in camp and on starting on the march.

The Forty-third Company of Philippine Scouts arrived at Camp Ward Cheney, Cavite, P. I., September 29, from field service in Davao, P. I. During the month of October 39 men out of 98, or 40 per cent, were found to have malarial infections. Thirteen cases were found in the Forty-eighth Company, Philippine Scouts, at the same post, coming there from field duty in Davao.

The surgeon at Cotabato, Mindanao, P. I., reports in October that 4 men had contracted typhoid fever while on field service in the Cotabato Valley. The infection was contracted six weeks after the men left the post.

WATER SUPPLY.

The water supply at posts is obtained from various sources; from rivers and lakes; from shallow and deep wells; and at several of the scout posts, from stored rain water. A few of the posts are now supplied with artesian wells, from which it is considered safe to use the water for drinking and cooking without sterilization. At a vast majority of the larger posts, however, the water for drinking and cooking is distilled and stored in a tank. From this tank it is drawn daily into a water-tank wagon and delivered to the various barracks and quarters in galvanized-iron water cans. The storage tank, the water-tank wagons, and the water cans are steamed out at stated intervals. In accordance with a division order a bacteriological examination is made twice monthly. On account of the danger that water may be contaminated during the delivery, most of the post surgeons recommend that all water for drinking purposes be boiled. The following table is a detailed report of the water used at the posts garrisoned by two or more companies:

Post.	Source.		Purification.		Distribution.	
	Drinking and cooking.	Bathing, etc.	Drinking and cooking.	Bathing, etc.	Drinking and cooking.	Bathing, etc.
Augur Barracks, Jolo	Surface (creek); impounded.	Same.	Distilled	None	Wagon and cans	Piped.
Camp Avery	Deep well	do	Boiled	do	Piped	Do.
Camp Connell	Rain water; collected in large reservoir.	Cisterns	Distilled	do	Wagon and cans	Cisterns at hand.
Camp Downes	Surface; impounded	Same	do	do	do	Piped.
Camp Eldridge	Mountain streams	do	Boiled	do	Piped, cans	Do.
Camp Gregg	Artesian	do	None	do	Piped	Do.
Camp John Hay	Spring	do	Distilled	do	Cans filled from storage tank.	Do.
Camp Jossman	Springs	Shallow wells	do	do	Wagon and cans	Do.
Camp Keithley	Lake Lanao	Spring and Lake Lanao.	do	do	do	Do.
Camp McGrath	Springs; impounded	Same	do	do	do	Do.
Camp Overton	Nunungan River	do	do	do	do	Do.
Camp Stotsenburg[1]	Deep-driven well	do	None	do	Piped	Do.
Cotabato	Rio Grande River	do	Roughly filtered and distilled.	Water that cooled distilling pipes.	Cans filled and delivered	Piped partially and cans partially.
Fort Mills	Deep well	do	Boiled	None	Piped	Piped.
Fort McKinley	Deep artesian wells	do	None	do	do	Do.
Fort Wint	Deep and shallow wells	do	Distilled	do	Wagon and cans	Do.
Fort San Pedro	Surface; impounded	do	do	do	do	Do.
Ludlow Barracks	Springs	Natuan River	do	do	do	Do.
Cuartel de Espana	Manila supply; surface; impounded.	Same	do	do	do	Do.
Pettit Barracks	Tamaga River	do	Roughly filtered and distilled.	Water that cooled distilling pipes.	do	Not stated.
Puerto Princesa	Cisterns	do	Boiled	None	Cans filled and delivered	Same.
Regan Barracks	Spring	do	Distilled	do	Wagon and cans	Piped.
Torrey Barracks	do	do	do	do	do	Do.
Warwick Barracks	Well; depth, 90 feet	Well; depth, 12 feet	do	Boiled	do	Do.
Zamboanga	Tamaga River	Same	Roughly filtered and distilled.	Water that cooled distilling pipes.	do	Not stated.

[1] Another supply from the Bambam River is distributed by pipes for watering animals, lawns, fires, etc.

SEWAGE SYSTEM AND DISPOSAL OF EXCRETA.

At a majority of stations in the division the dry-earth system is still in use. The surgeon at Fort Mills, Corregidor Island, reports in December "New main sewer complete and other sewers under construction." A new sewer system was completed at Fort Wint, Grande Island, during the year. A septic tank has been constructed at Fort William McKinley, Rizal, and is doing satisfactory work. A sewer system, with a sewage disposal plant of the sedimentation type, has been planned for Camp Stotsenburg, Pampanga, but work has not been commenced.

The surgeon at Warwick Barracks reported that the toilet facilities for the sewage system were unsatisfactory being of the old trough variety difficult to keep clean and with lids, permitting the access of flies. He recommended that modern sanitary toilet facilities be installed.

BARRACKS AND QUARTERS.

The troops in the division are more or less comfortably housed in buildings which vary in material from suali and nipa to reenforced concrete. Six new sets of barracks for coast artillery companies, one set of band quarters, and nine sets of officers' quarters, of reenforced concrete, have been completed at Fort Mills. Concrete barracks and quarters for officers were under construction at Camp Stotsenburg, but all construction work has been discontinued in view of the prospective abandonment of this post.

FOOD SUPPLY.

The chief surgeon reports that all permanent stations have been well supplied with fresh meat, vegetables, and commissary supplies, and that there have been practically no complaints in the reports during the year.

CLOTHING.

The clothing has been generally reported as satisfactory. Certain criticisms have been made with reference to the weight of the khaki issued. The continuous wearing of the legging has also been adversely commented upon. This article of uniform is a source of discomfort for officers and men doing office work.

BOARD FOR THE STUDY OF TROPICAL DISEASES.

During the year 1911 this board was composed of Maj. Weston P. Chamberlain, Capt. E. B. Vedder, and Capt. Horace D. Bloombergh, who was relieved February 14, 1911, by Lieut. J. R. Barber. In addition to the regular quarterly reports, several special reports have been furnished since the publication of the last annual report.

BERIBERI.

In the preceding annual report some account was given of the practical elimination of beriberi from the Philippine Scouts as a result of change in diet issued in accordance with the recommendation of the board. The important changes were the addition of a

legume, the reduction of the amount of rice issued, and the issue of an undermilled instead of a highly polished rice. Under the head of special diseases among the Philippine Scouts on page 130 will be found a statement as to the nearly complete disappearance of this disease.

In the last report there was also a discussion of the relation of highly milled rice to beriberi and of a number of experiments performed on fowls by the board to establish the relationship between highly milled rice and the occurrence of polyneuritis gallinarum. It was pointed out that among oriental peoples, who are accustomed to consume a large amount of rice, beriberi will occur if the highly polished or highly milled rice is used, and that this disease disappears or does not occur when the undermilled variety is used. Further than this it was shown that fowls fed on highly milled rice developed a polyneuritis in the great majority of cases. It was then known that the salts of phosphorus and potassium in the rice do not of themselves prevent beriberi, but it was believed that the amount of these salts present could be taken as an index of the beriberi preventive quality of the rice. Some samples of undermilled rice have since been examined which retained almost the entire pericarp and which undoubtedly would prevent beriberi, and yet these rices on analysis were shown to contain a percentage of phosphorus pentoxide, as low or lower than that contained in some specimens of highly polished rice, which were analyzed by the same chemist. The board is of the opinion that the character of the soil may affect very materially the phosphorus contents of rices as it does in the case of other grain. The board is further of the opinion that the amount of amido-nitrogen may be as reliable as an index as the salts of phosphorus and potassium.

During the year a large number of experiments were made on fowls to find if possible the exact food element or compound present in the outer layers of rice, the removal of which causes the occurrence of polyneuritis in fowls and beriberi in adults. In a report furnished in August, 1911, the following conclusions were reached:

We have made some progress in the identification of the neuritis-preventing substance contained in the extract of rice polishings prepared by the method described in our first paper. Of 1.34 per cent total solids contained in this extract, 0.03 per cent was ash. This we believe to be negligible since it consists entirely of inorganic constituents, chiefly of calcium, magnesium, and potassium which have been tried and found wanting. Nitrogenous matter comprises 0.04 per cent of the total solids. Of this only 0.02 per cent was present in the diffusate, which has been shown to contain the neuritis-preventing principle, and the remaining 0.02 per cent can be eliminated because it remained in the dialysate which failed to prevent neuritis. The 0.88 per cent sucrose is of no importance. Combining these unimportant substances and subtracting them from the 1.34 per cent of total solids, we find that there is only 0.4 per cent remaining. The neuritis-preventing principle must therefore be sought for in this 0.4 per cent of solid matter and must be a substance that is dialyzable, that is soluble in water, in 95 per cent alcohol, and 0.3 per cent hydrochloric acid, which is easily decomposed by heat and which possesses a strong affinity for bone black. The same substance or a similar substance is also contained in a decoction of ordinary white beans. Bodies corresponding to this description are found among the decomposition products of the proteids. It appears to us, therefore, that we have obtained sufficient information with regard to the nature of this body to attempt to identify it by the direct methods of chemical analysis.

The conclusions in a report in January, 1912, were as follows:

(1) These experiments all substantiate the theory that polyneuritis gallinarum and beriberi are caused by the deficiency of some as yet unknown substance in the food. We have shown previously that this substance is not phosphorus. (2) Kohlbrugge's

theory that beriberi is caused by an acid intoxication, which is due to the fermentation of rice by various saprophytic bacteria contained in the kernel, must be regarded as untenable. (3) To the list of substances which we have shown in previous papers to be of no importance in preventing neuritis of fowls there may now be added the following: Nitrogenous compounds, such as arginin, histidin, asparagin, and various amino-acids; lipoids of the lecithin group and cholin; extract of onions. (4) The neuritis-preventing principle is insoluble in ether. (5) The neuritis-preventing principle is absorbed by animal charcoal and the filtrate through the charcoal will not prevent neuritis. After absorption the active principle can not be removed from the charcoal by maceration with water, absolute alcohol, or ether. (6) The administration of large quantities of sodium chloride failed to produce edema in fowls suffering from polyneuritis. (7) Five cubic centimeters of our extract (equivalent to 5 grams of rice polishings) is sufficient to protect fowls subsisting upon polished rice. Two and one-half cubic centimeters (equivalent to 2.5 grams of polishings) is insufficient to confer complete protection from polyneuritis.

INFANTILE BERIBERI.

There is a very common disease in the Philippines among the infants, which several observers have considered to be infantile beriberi. It occurred to the board that this infantile beriberi could be cured by the simplified extract of rice polishings, which had been found to prevent polyneuritis when administered to fowls subsisting on highly milled rice. They determined to treat cases of this kind by administering the extract of rice polishing directly to the infant while permitting it to continue nursing its mother. With the aid of several civilian practitioners the Board was able to see and treat successfully 15 infants. The diagnosis in these cases has not been made by a single physician, but each patient has been seen by several physicians and the diagnosis confirmed. The mothers of all these infants had symptoms of incipient or marked beriberi. The children had all been breast fed. With one exception all were under three months of age. The disease usually has been ushered in with vomiting, which after a few days was followed by great restlessness, sleeplessness, continual whining, and later by dyspnea, increased cardiac action, and edema of the face and legs. Later still oliguria and aphonia developed in many of the patients. About one-half of the cases treated have had aphonia, and some appeared to be at the point of death. On the other hand, several cases were milder. The infants were all given 20 drops of the extract of rice polishings every two hours while awake, and the results were truly marvelous. Improvement is immediate. The vomiting stops in 24 or 36 hours. The child, who has not passed any urine for several days, urinates five or six times freely. The edema disappears in the course of a few days.

Usually on the first night after treatment is begun the infant falls into a deep sleep, although it may have been practically sleepless for several weeks. The dyspnea and palpitation cease after two or three days. At the end of a week or in less time the patients are completely cured, with the exception of the aphonia. The mother states that the baby is well and that she would be completely satisfied if only it would recover its voice. The aphonia, however, does not disappear until after about two months of treatment, when the voice usually returns quite suddenly. This is probably due to the fact that the aphonia is caused by degeneration of the pneumogastric nerves, which only slowly regenerate. It can be said that this extract is a "cure" in the true sense of the word, just as lime juice is a "cure" for

scurvy, and that it acts with as great promptitude as does fruit juice in infantile scorbutus.

In conclusion the board states that—

One can hardly fail to be convinced that beriberi is due to a deficiency of some as yet unknown substance in the food and that infantile beriberi is produced in those children who receive milk from a mother suffering from such a deficiency. Otherwise how can the remarkable effects of the extract treatment be accounted for? We regard our work with infantile beriberi as the final link in the chain of evidence which has been built up from experiments on men and animals, and which proves that an improper diet, usually one consisting mainly of highly milled rice, is responsible for the development of beriberi.

OLIVE DRAB COTTON UNIFORM MATERIAL.

After a series of experiments on samples of olive drab cotton uniform material of lighter weight than the regular issue, the board decided that olive drab is not a suitable color for ordinary wear in the tropics and that if any change is made from the khaki for use in the tropics it should be in the direction of a lighter rather than a darker shade.

HELMETS OF VARYING COLORS.

At the request of Col. Hodgson, president of the helmet board, some experiments were made to determine the relative coolness of a white helmet, khaki helmet, an olive drab helmet, and a campaign hat. The average of all the observations in all four experiments was as follows: Olive drab helmet, 40.42° C.; khaki helmet, 38.38° C.; white helmet, 35.36° C.; campaign hat, 46.60° C. The table emphasizes the great importance of color in uniform material. The helmets were exactly the same except for color. The board concludes that—

The general use of white garments as a uniform, however desirable it may be from heat reflection point of view, is for many reasons almost impracticable and khaki of a shade not darker than our present issue is a very good substitute for white material. For helmets there seems to us to be no valid reason why white should not be used. A white helmet can easily be kept looking well by the use of blanco and its appearance is not unattractive when combined with a uniform of khaki, olive drab, or any other color. If it be planned to use a helmet in actual hostilities a khaki or olive drab dressing can be provided with which to promptly change the cover of the helmet from white to a less conspicuous color. For the above reasons the board strongly recommends that any helmet which is adopted be covered with white material in place of either khaki or olive drab.

It was recently observed by the board that the French troops in Indo-China generally wore a white helmet and it is believed that the English soldiers do in India.

The importance of considering the heat absorbing quality of a uniform material is emphasized by the work reported at the recent meeting of the Philippine Islands Medical Association by Freer and Aron of the Bureau of Science. Their observations go to show that the injurious influences of tropical climates are probably due not to the short wave-length actinic or ultra-violet rays of the solar spectrum, but to the long wave-length heat rays. If, however, it is desired to give protection against a possible influence of actinic rays this can be accomplished by a black lining in the helmet. Under any circumstances the brim should have a lining of dark blue or green, as this is restful to the eyes.

THE DISADVANTAGE OF LEGGINGS FOR ROUTINE WEAR IN THE TROPICS.

The order abolishing khaki trousers and requiring the constant use of leggings with service uniform is in the opinion of the board a step in the wrong direction. Loose, well-ventilated clothing is generally

considered one of the requisites for comfort and health in hot countries. In the Tropics, leggings, whether of leather or canvas, cause increased perspiration of the legs, predispose to skin disease, probably interfere to some extent with the circulation, and especially for those engaged in sedentary occupation, add one more discomfort to the many discomforts inherent in a climate where the temperature is continuously elevated. It is, the board believes, inadvisable for sanitary reasons to require their constant use for ordinary garrison duty in hot countries, for the line of the Army, and still more so for the staff departments.

THE RELATIVE RESISTANCE OF BLONDES AND BRUNETTES TO THE HARMFUL INFLUENCE OF A TROPICAL CLIMATE.

During the last two years the board has been collecting data bearing upon the influence of the tropical climate on blondes and brunettes. Exact observations were carried out at various posts in the islands on 500 blonds and an equal number ot brunettes. Quarterly tests were made on the weight, temperature, pulse, respiration, blood pressure, and muscular strength. Examinations of the blood and stools were also made. The board states that—

After a study of the influences of the tropical climate, it does not seem to us by any means proved that the actinic rays of the sun are factors in tropical morbidity or that pigmentation of the skin is a protective effort on the part of nature against the chemical rays of the solar spectrum. It appears that the main causes of the troubles encountered in the Tropics are infections, continuous heat, and high humidity. Subsidiary causes are nostalgia, isolation, monotony, and the excessive use of alcohol resulting therefrom. Amelioration of these subsidiary conditions and sanitary improvements directed against the infections prevailing in the Tropics have enormously reduced the morbidity and mortality in the Philippines, in Panama, in Cuba, and elsewhere in hot countries. Affections of the nervous system, including neurasthenia and insanity, are among the diseases considered by Woodruff to be particularly liable to occur in the Tropics as a result of excessive light stimulation. He based his opinion on the figures gathered in 1901 and 1902. Subsequent statistics do not confirm the view that nervous diseases are prevalent in the Philippines. The reports of the Surgeon General of the Army for the years 1903 to 1909, inclusive, show that insanity and nervous diseases have been no more common among the soldiers in the Philippines than among those in the United States. For the last five years, 1904 to 1909, there has been no material difference between the suicidal rate in the Philippines and that in the United States. Neurasthenia has played but a small part in the morbidity of the islands during these years. Yet the sunlight is the same as in the period from 1898 to 1902, and no special effort is made to protect the men from the sun, but the hardships, the bad sanitation, the poor food, the isolation, and the nostalgia of the earlier days have been largely remedied.

It is well known that heat and humidity in an experimental chamber and in the absence of light can produce symptoms similar to those occurring in milder degree among residents of the Tropics. We think it probable that these two factors, combined with infections, nostalgia and monotony, account for most if not all of the injurious effects seen in tropical lands. To explain the conditions met with in the Philippines there seems to be no need for invoking the aid of the actinic rays of the solar spectrum. Protection against these rays by orange-red clothing was found to be of no benefit. It is by no means proved that pigmentation per se is beneficial in the Tropics. In our investigations of blondes and brunettes the evidence was conflicting, some facts being in favor of the fair and others in favor of the dark-complexioned men. This is what would be expected if there were actually no difference between the two types as regards their resistance to tropical influences. From a consideration of all the data it appears that blondes are quite as well able as brunettes to withstand the influences of the Philippine climate for a period of two years and probably for a period of five and one-half years. In case of residence beyond the latter period we are not in a position to express an opinion based on any extensive personal observation.

THE ERYTHROCYTE COUNT AND HÆMOGLOBIN READING FOR HEALTHY WHITE SOLDIERS LIVING IN THE PHILIPPINES.

There were 1,418 erythrocyte counts and an equal number of hæmoglobin estimations made on the blood of 702 soldiers. The average red count was 5,200,000, and the average hæmoglobin, 89.6. The hæmoblogin readings and the color index are perhaps a trifle below what is to be expected for the same class of men in Europe and America, but the reduction is very slight and not sufficient to be considered evidence of a definite anemia. The average length of tropical residence in the series at the date of the last examinations was about 20 months. Investigations have shown that most of the conditions formerly diagnosed as "tropical anemias" are in reality instances of secondary anemias due to infection with parasites, notably uncinaria and plasmodia. The pallor seen in many persons living in the Tropics is due usually to a superficial ischemia, the red cell counts and hæmoglobin estimations in such cases showing no impoverishment of the blood.

THE BLOOD PRESSURE AND PULSE RATE IN THE TROPICS.

Five thousand three hundred and sixty-eight blood-pressure readings were made on 992 healthy white soldiers and 552 observations on 386 healthy adult Filipinos. There were an equal number of pulse counts made on the same individuals. The blood pressure was a little below the standard for temperate climate and was lowest during the hottest part of the year. The pulse rate for both races averaged a few beats above the usual standard in the temperate climate.

INFLUENCE OF TROPICAL RESIDENCE ON WEIGHT.

One thousand one hundred and seventy-two soldiers who had been in the Tropics for varying periods were weighed and observed from time to time. There was an average loss of weight of about 2 pounds in a year. In the case of 200 men who had arrived in the Phillipines very shortly before the first observations were taken, the average loss of weight for a year was 3.2 pounds, or 2.3 per cent of the original weight. This suggests that the loss of weight in the Tropics may be more marked in the first year of service than at a later date.

INFLUENCE OF TROPICAL RESIDENCE ON THE BODY TEMPERATURE.

A large number of temperature readings were made on American soldiers. At no time in the readings taken was the generally recognized mean of 98.6° F. exceeded by more than 0.4° F., and at most periods the difference was 0.2° F. or less.

CAUSES OF MORBIDITY, MORTALITY, AND INVALIDING IN THE PHILIPPINES.

The board has had occasion to examine the white men who were invalided home from the Philippine Islands, and also to investigate the amount of sickness in a group of 1,000 American soldiers who had an average of two years of Philippine residence. The point of special

interest is the comparatively small part played at the present time by tropical diseases in the invaliding, morbidity, and mortality of the American troops serving in the Philippines. Considering as "tropical diseases" the diarrheas, the dysenteries, the chronic enteritis, the liver abscesses, the sprue, the cholera, the malarial and undetermined fevers and dengue, the ringworm, and the insolation, we find that these combined maladies caused 26.2 per cent of the admissions, 15.2 per cent of the days lost from sickness, and 9.3 per cent of the invaliding and 12.5 per cent of the deaths. The total death rate from diseases (excluding suicides and injuries) approximate 3 per 1,000 annually. The amount of disability, death, and invaliding now being caused by dysentery and its sequelæ is astonishingly small, being about 6 per cent of the total. Venereal disease caused one-quarter of the sickness among the 1,000 soldiers, and tuberculosis caused one-quarter of the invaliding home.

Aside from tuberculosis, the mental and nervous diseases were the largest causes of invaliding, but a great number of the mental cases were found to have existed prior to enlistment, and a study of the statistics in the reports of the Surgeon General of the Army for the years 1904 to 1909, inclusive, brings out the fact that the incidence of mental and nervous diseases during that 5-year period was no higher in the Philippines than at home. The number of suicides was considerable, but the statistics from the reports of the Surgeon General for the years 1904 to 1909, inclusive, show that the death rate from suicide was not materially higher in the Philippines than at home. It may be concluded, therefore, that during the last few years there has been manifest no evidence of any serious effect on the nervous systems of our soldiers as a result of the Philippine climate. The more rapid the eradication of the idea that the climate, per se, injuriously affects the nervous system, the more rapid will be the decrease of such mild forms of neurasthenia and instability as are due largely to a preconceived dread of the effects of Philippine residence. It seems that there is strong evidence in favor of the assumption that most of the morbidity, which formerly occurred as a result of residence in the Tropics, was due not to the climate per se, but to the infections which, in the light of present knowledge, can almost entirely be avoided by good sanitation.

SKIN DISEASES AMONG THE FILIPINOS IN MANILA.

During more than two years members of the board have had charge of a dermatological clinic in Manila. The patients belonged to the poorer classes, and for the most part lived in Manila. The number treated was 532; of this number 11 were due to blastomycotic infections; 209 to tinea infections, 111 bacterial, 51 higher animal parasites, and there were 150 classed as general skin diseases. Among the most striking cases seen recently were those patients presenting areas lighter in color than the normal skin. Other authors have called attention to the fact that tinea versicolor in dark skinned natives manifests itself by white or fawn colored areas. This fact does not seem to be universally recognized. Several cases have been encountered where no suspicion of the true nature of the disease had been entertained by the attendant. In all of these patients the microsporon furfur was easily demonstrated in the light colored areas after macerating the scales in a 10 per cent solution of potassium hydrate.

SPIROCHAETES AND FUSIFORM BACILLI IN LESIONS OF THE THROAT, MOUTH, LUNGS, AND INTEGUMENT.

During the last quarter of 1911, the observations were completed that had been in progress for two years to determine the frequency of occurrence in the Philippines of the so-called "Vincent's angina."

These organisms were found associated in a great variety of lesions in the mouth and throat. Of 106 patients examined, 53 per cent showed the associated parasites in greater or less number, and 32 per cent had them present as the preponderating organism. In some of the throat and mouth ulcers in which the spirochaetes and fusiform bacilli were found, the lesions were undoubtedly due to syphilis. In one case the lesion was probably a carcinoma. Other observers have found the organisms associated with the Klebs-Loeffler bacillus. In view of these observations, it is the opinion of the board that the finding of fusiform bacilli and spirochaetes in smears from a throat lesion does not justify one in resting content with a diagnosis of "Vincent's angina." Experience shows that syphilis, diphtheria, carcinoma (and very probably other etiological factors) must be carefully ruled out. It is still an open question whether the associated fusiform bacilli and spirochaetes are ever causative of the multiform lesions in which they are so often found to be present.

TYPHOID FEVER IN THE PHILIPPINES.

The board has collected additional evidence that typhoid fever is endemic in the Philippine Islands.

THE VARIABLE RELATION BETWEEN THE CLUMPING AND THE STOPPAGE OF MOTILITY IN THE WIDAL REACTION.

A series of comparative microscopic and macroscopic agglutination tests with the bacillus typhosus have been made.

It is impossible to draw full conclusions from these sets of observations. One may, however, remark upon the general close agreement between the macroscopic results and the microscopic indications shown by stoppage of motility. However, in one case the reaction by the two methods gave diverse results. In general results would appear to indicate that the substance ordinarily concerned in the Widal reaction may be an agglutin acting on the flagella, and this seems especially likely to be true for sera from inoculated subjects. The question as to whether there are two agglutinating substances, one acting on the bodies and the other on the flagella of bacteria, has been discussed by Smith and Reagh.

It has been the rule of the board, in making microscopic agglutinations, to regard stoppage of motility as the most important element in the reaction. A serum that causes clumping without stopping the progressive motility of the bacilli, or the dragging about of the clumps, has always been ruled as negative. One that stopped motility without producing any clumps in one hour would heretofore have given rise to much uncertainty. This latter condition has been found only once in serum from typhoid suspects, or from patients suffering from typhoid fever, and in this instance the serum gave a negative microscopic reaction. Stoppage of motility without clumping has been met with in several cases of vaccinated persons and inoculated rabbits. In any event, it is necessary to bear in mind when examining strange sera, that complete stoppage of motility without clumping probably does not indicate a negative reaction, and that in such a case it is desirable to control the test by the macroscopic method, or, if that be impossible, by the performance of the microscopic test in several dilutions.

EXPERIMENTS AS TO THE INFLUENCE OF IPECAC ON AMOEBA.

The amoeba experimented with were of two strains, one isolated from the stool of a normal man and the other from tap water. The results would have been more conclusive if a pathogenic amoeba could have been used, but in the opinion of the board the pathogenic amoebae can not be cultivated. However, if one may be allowed to draw conclusions from the effect of drugs on various species

of other protozoal organisms, it seems reasonable to assume provisionally that a drug like ipecac, which is effective against the nonpathogenic amoebae is likely to be inimical to the development of the pathogenic variety or varieties. From the experiments it was concluded that ipecac did no harm and probably no good in bacillary dysentery, and that in amoebic dysentery the drug is likely to be of great benefit by acting directly against the amoebae on the exposed surfaces of the bowel and indirectly after absorption into the blood stream on the amoebae imbedded in the tissues surrounding the dysenteric ulcers. It has been demonstrated in a scientific way that ipecac is a true specific for amoebic dysentery, thus confirming the statements of numerous clinical observers. It has also been shown that the various preparations of ipecac vary greatly in efficiency. This affords an explanation of the lack of success attained by the use of this drug in amoebic dysentery by certain other clinicians. The board concludes this action of ipecac is not due to a single ingredient of the ipecac but due in part to the action of emetin, cephaelin, and to other ingredients as yet unknown.

EPIDEMIC OF DYSENTERY AT ORMOC, LEYTE.

The epidemic began in Ormoc and Bay Bay at about the same time, possibly first in Bay Bay, but was well established in both places by the middle of October, 1911. It then began to spread, and appeared in Puerto Bello and Merida about November 1. Later it began to extend to the little barrios and isolated houses in the hill country back of the larger villages. The date of its appearance in Albuera was not ascertained. Transmission was probably by contact for the most part since the cases occurred at regular intervals, and not in large groups, while very many of the deaths reported were in children under three years of age, too young to eat indiscriminately outside their own homes. A striking example of the probable method of transmission was shown at Puerto Bello, where a 4-year old boy with dysentery was found in a small house with five or six other young children. The board saw three or four deposits of intestinal mucous discharge lying on the floor and the ground outside of the house, affording ideal opportunities for contact infection and also a great attraction to the numerous flies that swarmed about. The subject of any general infection of the water supply can probably be dismissed since the supplies are so varied in all these towns, being derived from shallow wells and several small streams. In addition there was no sudden widespread flare-up, suggesting water-borne infection, in any place visited.

Clinically, the most striking feature was the tremendous mortality. Not a convalescent was found or reported, and only one living case of more than a week's standing was seen. The incidence of the disease among children under six years old was very great. One could drive through the town at a time when all the remaining children would be on the streets and see no more than twenty or thirty small ones.

The usual course of the disease, in the fatal cases, was rapid and overwhelming. The children generally were fairly well and comfortable the first day, with only a moderate number of stools and with but little pain. They were commonly only a little worse the second day, and usually in collapse on the third. Death came within 3 or 4

days at the latest, there being only one case, in which the child lasted more than a week, and this one ultimately died with severe anemia, oedema of face and limbs, and heart failure. The prominent and striking feature in nearly all the cases was the toxemia which, with the mildness of the intestinal symptoms, was very suggestive of the Shiga type of dysentery. Fever was not always present, and usually subsided with the onset of collapse. An average maximum would be 101° F.

The board believes that the disease which visited that section of Leyte was a very virulent form of bacillary dysentery and that it was almost entirely confined to the period of childhood and was characterized by an extremely high mortality.

DYSENTERY BACILLI CARRIERS.

During the first six months of 1911, out of 60 stools examined, from 35 persons, mostly typhoid suspects, and convalescents, four carriers of dysentery bacilli were found. One of these cases had two organisms in his stools; Shiga and Morgan No. 1. The identity of the organisms in these cases was established by their fermentation reactions on the sugars, their morphology and motility, and their indol production.

It is evident that the incidence of dysentery bacillus carriers is as great as, if not greater than, that of typhoid carriers. It is also clear that dysentery convalescents should be returned to duty only under the same restrictions as those now governing typhoid convalescents in the military service. The importance of contact infection from carriers as a cause of bacillary dysentery is greatly emphasized by the findings just recorded. The detection of four dysentery bacillus carriers out of 35 persons examined shows as high a percentage of positive results as any quoted by Chapin, and serves to lay stress on his major proposition, that carriers and missed cases may be very great factors in the spread of disease.

A FEVER OF UNDETERMINED TYPE.

For several years there has been on Corregidor Island a body of civil convicts, drawn from Bilibid Prison in Manila. There are 1,000 of these prisoners and, except for a few Chinese, they are all Filipinos belonging to the various tribes in the archipelago. They are employed at heavy manual labor, are fed on a ration almost equivalent to that of the Philippine Scouts, and are guarded in a stockade, where they herd together at night in large bunk houses, which, though well ventilated, allows no more than 120 cubic feet of space for each man.

The situation was carefully studied by Lieut. Barber on duty there, and, who later became a member of the board. The greatest factor in the production of disability in the stockade, aside from the large one of trivial injuries and infections, was that of fever, type undetermined. After several months observation, during which time numerous blood examinations and leucocyte counts were made, together with a number of agglutinations with the typhoid bacillus, it was concluded that most of the cases of fever could best be classified under two heads, "ephemeral fever," and "seven to fourteen day fever." A goodly number of the more severe cases of illness proved to be lobar pneumonia, which was found 22 times, there being 2 deaths. A few cases proved to be due to obscure pus infections, though the patient did not complain of local pain. In one such case the local lesion was a

carbuncle 2 inches in diameter, over the deltoid. Eliminating all complications, however, there was a very large number of cases which fell very naturally and easily into the two classes mentioned above, and for which no cause was discovered during the observations.

The "ephemeral fevers" deserve little notice; usually the man came in from work on the hot afternoons, showed a high temperature and rapid pulse, complained of headache and dizziness, and recovered promptly on free purgation, rest, and sponging.

The "seven to fourteen day fevers" were charted carefully and showed a regular, characteristic course. An attempt was made to classify them under two headings, that of seven-day and that of twelve-day fever, but careful study of the charts showed that there was no definite division.

The results of the bacteriologic study of this fever were negative. One case gave a good agglutination with bacillus paratyphosus "A," but this reaction occurred on the third day, a time when it would not be expected if due to the febrile disturbance at that time affecting the patient, and it was not increased on the twelfth day. It would, therefore, seem that this single case can be disregarded, since the eight others gave negative reactions, and since this case itself did not give positive results from blood culture and did not show any increase in agglutinating power in a period of nine days.

It would seem that this "seven to fourteen day fever," with its usually rapid onset, its great incidence during the hot weather, its low mortality, the moderate changes in the leucocyte count, as compared with the average count of the Filipino, should be classed with those fevers of doubtful etiology, of which Rogers's "seven-day fever" is a type. It can not, however, be identified with the fever of Rogers, since the course is consistently longer, the pulse more rapid, the leucocyte count higher on the average, and the pain and prostration much less severe. It must be remembered, however, that these stockade prisoners are an especially tough and hardy set of men, hard worked and well fed, and living practically in the open, while Rogers's cases were in Europeans living in the tropical environment of Calcutta.

THE EFFECT OF ULTRA-VIOLET RAYS ON ANIMAL PARASITES IN WATER.

Several investigators have shown that the ultra-violet rays of the spectrum are capable of killing bacteria in a few seconds, and the Westinghouse Cooper Hewitt Co. of London and Paris have constructed several types of practical water sterilizers utilizing these rays. The ultra-violet radiation upon which the action of these sterilizers depends is produced by a quartz mercury vapor lamp either suspended over or immersed in the water.

In considering the use of such a sterilizer in the Tropics the board was confronted by the fact that bacterial pollution is not the only nor in some cases the most important danger that lurks in the drinking supply. Amœbæ are found in practically all tropical surface waters and while in the opinion of the board the free-living species are not pathogenic, it is to be expected that *Entamœba histolytica* will be encountered under the same conditions of pollution that would cause the presence of typhoid bacilli or cholera spirilla in the water. In similar circumstances, *Balantidium coli*, *Lamblia intestinalis*, and other protozoa, as well as the ova or larvæ of various parasites are liable to occur.

Experiments were conducted to determine the effects of these rays on the organisms mentioned. These experiments taken as a whole undoubtedly demonstrate that in a water supply the amœbæ

whether motile or encysted, may be killed by a comparatively short exposure to ultra-violet rays. Balantidia also appear to be destroyed by the same agency.

These facts afford a very potent argument in favor of the use of these radiations in the practical sterilization of water in the Tropics. The board had no opportunity to test the apparatus manufactured for this purpose, but since the results of these preliminary experiments have proved so satisfactory the board hopes to perform this important work in the near future with a view to determining whether the rays are fatal to amœbæ and other protozoal parasites under the conditions obtaining with the commercial sterilizer in practical use.

EXPERIMENTS TO TEST THE FINENESS OF MESH NECESSARY IN BRONZE NETTING TO PREVENT THE PASSAGE OF ANOPHELINÆ AND STEGOMYIA.

The Surgeon General directed that these experiments be made with a view to determining whether the Philippine Anophelinæ could pass through 16-mesh bronze gauze. Tests were carried out with 8, 12, 14, and 16 mesh gauze and with both horizontal and vertical gauze partitions. Starvation tests were made where a single layer of netting separated the mosquitoes from food and water, and sexual attraction tests where unfertilized females were separated from freshly hatched males by a double partition of the mesh to be examined. A practical test was made by sleeping under a 16-mesh bronze gauze bed net in a locality where anophelines were very numerous.

It was found that 16-mesh bronze gauze was impervious to the following insects: *Myzomyia rossii*, *Myzorhynchus barbirostris*, *Pyretophorus freeræ* (Banks), *Mansonia annulifera*, *Mansonia uniformis*, *Culex fatigans*, and *Culex microannulatus*, *Myzomyia rossii*, which is as small as any common Philippine species of the Anophelinæ, was unable to pass through either 16, 14, or 12 mesh metallic gauze, but did go through 8-mesh cotton netting.

Mosquitoes of the genus *Stegomyia calopus* were found to pass through 16-mesh bronze gauze with considerable ease. Out of several dozen insects which were tested, eight males and nine females succeeded in going through the 16-mesh netting. One female effected a passage through a double partition of the gauze to join the male on the opposite side.

Our experience agrees with that of Darling, who found in Panama that Stegomyia could pass and Anophelinæ could not pass through 16-mesh metallic gauze.

The board concludes that although the 16-mesh netting will probably keep out all malaria-bearing anophelines found in the Philippines, the board considers its use inadvisable because it does not keep out mosquitoes of the genus Stegomyia, which are not only extremely annoying insects, but are a potential source of danger in case yellow fever should be introduced into the Archipelago.

DIPHTHERIA IN THE PHILIPPINES.

During the last 11½ years 133 cases of diphtheria with 69 deaths have been reported in Manila. The monthly occurrence was January 19, February 9, March 9, April 15, May 15, June 4, July 12, August 10, September 10, October 5, November 18, and December 7.

The number of reported cases is rapidly increasing, probably as a result of greater accuracy in diagnosis in more recent years. Of the

133 cases at least 62 were Filipinos. The figures are sufficient to show that diphtheria is to be expected not infrequently in the Archipelago. The too common belief that the disease does not occur here or occurs only with extreme rarity should be dispelled, since it has led in the past to failures to diagnose certain serious cases which undoubtedly would have been subjected to cultural tests if the illness had occurred in the United States. Season seems to exercise no influence on the incidence of the disease in Manila, whereas in temperate climates the number of cases greatly increase during the colder months. This uniformity of incidence is probably due to the comparatively unvarying temperature conditions existing here.

ARNETH'S NUCLEAR CLASSIFICATION.

Blood counts were completed on 72 American and 50 natives. The board concludes that in all their series of Filipino bloods that there is:

> First, an absolute number of white cells within normal limits; second, a markedly low relative proportion of polymorphonuclear neutrophiles; and third, an abnormally high percentage of the neutrophilic elements which fall in Classes I and II of Arneth and which are supposed to be deficient in phagocytic power. Therefore, in the Filipino blood there is both a relative and an absolute reduction in the phagocytes, the cells which, with the aid of opsonins, are concerned in destroying bacterial invaders.
>
> If this state of things is general in tropical races, it may be a visible indication of the lowered resistance of such peoples to certain newly introduced maladies and to some epidemic tropical diseases which generally cause among natives a higher mortality than is experienced among Caucasians. In the first class of diseases may be mentioned measles, leprosy, syphilis, and tuberculosis, and in the second class plague and cholera. Apparently the natives of the Philippines have a good resistence to infections with staphylococci and streptococci, and this clinical fact may be related to the observations of Buchanan who could find no relationship between the degree of nuclear subdivision and the number of cocci engulfed by the neutrophilic cells.

The board concludes, (1) both Filipinos and Americans residing more than a year in the Philippines had a normal average number of white cells per cubic millimeter; (2) in both races the percentage of polymorphonuclear neutrophiles was much decreased below the minimum considered normal for white men in temperate regions; (3) probably the polymorphonuclear neutrophiles are the only actively phagocytic cells in the circulating blood; (4) the average Arneth picture showed a marked shift to the left in the case of Filipinos and a slight drift in the same direction for Americans resident more than a year in the Philippines; (5) a shift to the left in the Arneth count probably indicates a diminution in the phagocytic power of the blood in question; (6) from the first five conclusions it will be apparent that the Filipinos show an actual absolute reduction in the number of polymorphonuclear neutrophiles (phagocytes) and that of this reduced number an abnormally large proportion are deficient in phagocytic power (in other words, the Filipino has absolutely fewer efficient phagocytes than are found among white men either in the Philippines or at home); (7) this reduction in circulating phagocytic cells may be a visible indication of a lowered resistance to infections on the part of native races; (8) no material differences in the differential count or the Arneth picture were observed between two groups of American soldiers, one group consisting of 28 pronounced blonds, and the other group of 28 pronounced brunettes.

THE SO-CALLED X-BODIES IN BLOOD.

The board demonstrated conclusively that the so-called X-bodies in blood were simply artefacts in glass slides.

EXAMINATION OF EMERGENCY RATIONS.

Tests were made on emergency rations stored in Manila from three to five years. The board found that the rations were free from bacilli of the meat poisoning group, and from the tubercle bacillus, and that both were safe articles of diet and had not been harmed by long storage in the Tropics.

TRANSPORTS.

SANITARY CONDITION.

The sanitary condition of the various transports and the accommodation provided for troops on them has been in the main satisfactory, and the majority of the sanitary faults which existed or have arisen from time to time have been corrected with promptness. A matter of some importance that has been called to the attention of the War Department was the quarantining of some transports at Manila on account of measles and mumps. In regard to this matter the chief quarantine officer stated:

> It has been customary upon the arrival of these infected transports to permit the Army to manage the quarantine incident thereto, but in several instances the disease has spread considerably and the civil population has been seriously menaced. In view of the fact that these diseases prevail to a very slight extent in the Philippine Islands, it will be apparent that their introduction here is of serious import. * * * In view of the fact that every transport which has arrived, from January, 1911, to December, 1911, has had either measles or mumps aboard, it is not believed to be unreasonable to ask that troops and their effects be placed on transports in a noninfected condition. If it is very expensive to quarantine troops at San Francisco, it is believed that this might be avoided by quarantining them at the posts from which they start. If the posts in the United States which are known to be infected with measles were thoroughly freed from that disease, and no soldiers or officers sent to the Philippines unless they had been connected with posts which are known to have been free from measles for a period of at least 21 days prior to their embarkation, it is believed that such a plan would be effective. * * * Measles are here, and they are of the type ordinarily encountered in the United States, and they are causing great havoc among the residents of these islands. If transports infected with the disease had not arrived in the Philippines, it is a reasonable inference that the present epidemic of the prevailing type would not have occurred.

The following is taken from a memorandum on this subject from this office for The Adjutant General:

> (1) This office, with the assistance of the Bureau of Insular Affairs, has sought in vain for any law making measles and mumps quarantinable diseases at ports of entry in the Philippines. In paragraph 959 of the Manual for the Bureau of Health for the Philippine Islands, 1911, measles (though not mumps) is named among the "dangerous communicable diseases," together with typhoid fever, chicken pox, filiariasis, tuberculosis of the lungs, and other diseases which are not usually considered quarantinable diseases in the usual acceptation of that term and as far as ships are concerned or between different communities, although several of them are treated by house quarantine in municipalities.
>
> It appears from the first indorsement on the inclosed paper that all the measures applicable to dangerous communicable diseases are now being applied to such cases of mumps and measles as are landed from transports or occur at posts in the Philippines, and, therefore, it is not clear to this office that under the municipal sanitary regulations of Manila or other regulations promulgated by the Health Department any further

action can be reasonably demanded of the military authorities unless the importance of the Army personnel as a factor in the distribution of these diseases in the Philippines is much better established than at present.

(2) The chief quarantine officer states that "it is not believed to be unreasonable to ask that troops and their effects be placed on transports in a noninfected condition." He suggests that this might be done by freeing the posts in the United States thoroughly from these diseases and not sending to the Philippines officers and soldiers unless they are connected with posts which are known to be free from measles at least 21 days prior to their embarkation. The freeing of posts in the United States from these diseases is a consummation devoutly to be wished and the earnest efforts of the Medical Department of the Army have been directed toward this end for many years past. Unfortunately, however, the task is not as simple as it may appear.

Unassigned recruits coming from recruit depots are largely responsible for the transmission of mumps and measles and although every effort is made not to send those who are sick with these contagious diseases and also those known to have been exposed to infection, yet the efforts in this direction have been quite disappointing. The failure has been due in part to the long period of incubation of these diseases and the exceedingly contagious character of measles during the prodromal period of indefinite symptoms. Another serious difficulty which could be obviated is the overcrowded condition of the barracks, especially at Columbus Barracks, Ohio, during the periods when recruiting is active, which prevents effective methods of segregation and isolation. The attention of the War Department has been recently called in a practical and effective way to this need and it is hoped that an appropriation may be obtained to meet it.

The quarantining of even small bodies of unassigned recruits at their depots is by no means a simple task, involving as it does separate messing arrangements and sleeping arrangements for them and their exclusion from the post exchange, reading room, gymnasium, baths, water-closets, and all other places where they come in contact with others of the command. In the cases of regiments and battalions under orders for the Philippines such a quarantine is both impracticable and futile, the only available step being the exclusion from contact with them of all cases of contagious diseases which is now required by the regulations of the Medical Department. Troops are also required by paragraph 194 of the Army Transport Regulations to be examined critically by a medical officer before leaving the posts in order to exclude all cases of contagious diseases. This, however, does not reach men in the period of incubation of infectious diseases, although a number of these are picked up at the port of embarkation before going on board the ship.

Periods of quarantines of large commands for the detection of cases of contagious diseases having long periods of incubation such as mumps, measles, and smallpox, are most unsatisfactory where they have to embark on fixed dates because new cases are liable to occur and prolong still further the expiration of the period of 21 days of freedom from a case of the disease which is suggested by Dr. Heiser. Also, if quarantine is resorted to it can not reasonably be limited to measles and mumps, but should apply to other dangerous communicable diseases also. The enormous expense and inconvenience of holding a large command for indefinite periods, and at the same time holding a transport in readiness to receive them, can be well appreciated. It has compelled the sanitary department of the Army to accept the point of view adopted by the sanitary authorities in civil life and limit the efforts to control these diseases to segregation of recognized cases and sometimes their more intimate contacts also.

(3) In view of the vast expense and many practical difficulties in the way of carrying out the recommendation of the chief quarantine officer, it is appropriate to consider somewhat critically the reasons for making this request.

The records show that during the year 1911, 59 cases of measles and 46 cases of mumps were transferred from transports to military hospitals in the Philippines. In view of the fact that these cases were carefully segregated in military hospitals, it is extremely improbable that they were brought into contact with the civil population and in view of the further consideration that measles have existed in Manila for many years, and the chief quarantine officer states that at the time of writing his indorsement probably 1,000 cases existed in Manila and vicinity, it would appear that the presence of measles on Army transports could have very little to do with the diffusion of this disease in Manila.

This seems to be recognized by him, but he states it as his belief that the kind of measles introduced by the Army is a much more serious type than that prevalent in the Philippines. While his opinion in this matter is entitled to all respect, like other scientific facts, it can not be accepted without demonstration. The records of this office show that in the past five years 151 cases of measles have occurred in the Army in the Philippine Islands without a single death, whereas in an outbreak of some 30 cases which occurred at Columbus Barracks in the first part of the year 16 deaths occurred, the case mortality for the United States for 1911 being 28 per 1,000 of sick

These facts would seem to indicate what one would naturally expect, viz: That measles in the tropics is a mild disease alike for soldiers and civilians, Americans and Filipinos, owing to the favorable influences of warmth and abundant fresh air. The chief quarantine officer states that "the fact remains that measles are here and they are of the type ordinarily encountered in the United States, and they are causing great havoc among the residents of these islands."

The vital statistics of the city of Manila show only one death from this cause in 1911, none in 1910, and one in 1909. If the mortality of the Army type of measles as existing in Manila is accurately shown by these statistics, it would hardly appear to warrant the quarantining of troops, the upsetting of sailing dates for transports, or other delays at Manila for the purpose of disinfection.

It is thought that a careful carrying out for the troops and for civilians attached to the Army of the measures now in vogue, which are substantially those required on the occurrence of cases among the civil population of Manila, is all that can reasonably be expected of the military authorities.

During the year 1911, 99 cases of measles and 107 of mumps occurred on transports among the military passengers. Thirty-six cases of the former and 23 of the latter occurred on the *Logan* in March on the trip from San Francisco to Manila. On this same transport during the same trip an extensive attack of ptomaine poisoning occurred, about 800 cases in all, about 50 cases of which were treated in hospital. None of the cases were dangerous, and only one was considered of sufficient importance by the surgeon to be made of record. An investigation was conducted under direction of the commanding officer of the troops, but the cause was not determined.

No case of smallpox occurred among any of the military passengers or officers. One case occurred on the *Dix* in the person of a Filipino in August, 1911. The *Dix* was then lying at Seattle where smallpox was endemic. The proper precautions were taken and no secondary case occurred.

DENTAL AND ORAL DISEASES.

The number of dental operations during the year was 57,454, being an increase over the preceding year, which was 49,666. The ratio per 1,000 of mean strength was also greater, being 716.54, as compared with 634.13. This, however, can not be taken as a measure of the dental diseases in the Army, but represents what the number of dentists available are able to accomplish. The number of dentists authorized has been increased by Congress, so that ultimately each man in the Army can receive at least one treatment yearly.

The summary of the work of contract dental surgeons is contained in the following table:

TABLE NO. 63.—*Dental and oral diseases.*

	Cases admitted to treatment.		Operations performed.	
	Number.	Ratio.	Number.	Ratio.
United States (continental) exclusive of Alaska	32,441	558.18	34,204	588.52
Philippine Islands	17,605	938.68	21,188	1,129.73
Alaska	440	375.43	452	385.67
Hawaii	2,052	960.67	1,610	753.75
Total	52,538	655.23	57,454	716.54

DENTAL CARIES—NUMBER OF TEETH TREATED.

	White troops.		Colored troops.		Filipino troops.		Total.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
United States (continental) exclusive of Alaska	18,711	339.05	377	128.54	.....	.....	19,088	328.43
Philippine Islands	9,605	712.06	.....	.....	411	78.05	10,016	534.04
Alaska	402	343.00	.....	.....	.....	.....	402	343.00
Hawaii	1,123	525.75	.....	.....	.....	.....	1,123	525.75
Total	29,841	414.56	377	128.54	411	78.05	30,629	381.99

GENERAL HOSPITALS.

LETTERMAN GENERAL HOSPITAL, SAN FRANCISCO, CAL.

This hospital, formerly known as the "General Hospital, San Francisco, Cal.," was changed to the "Letterman General Hospital," in honor of Jonathan Letterman, Medical Director, Army of the Potomac, by General Order No. 152, War Department, November 23, 1911. It is used as a base hospital for the Philippines and Hawaii, a post hospital for the Presidio, San Francisco, a general hospital for the western part of the country, and is the largest general hospital in the Army.

The following construction has been completed during the year: a new officers' ward and an isolation ward; an addition to the nurses' quarters; new bath and toilet rooms for about one-half of the wards; additions to the power house, laundry, and dining room; a new road in front of the storehouses and shops; the installation of an automatic fire-alarm system for the protection of the entire hospital; two solariums of two rooms each, giving a place for patients during the day; in addition, a large amount of smaller repairing was carried out.

A new kitchen is now being constructed. This building is very much needed. The old one was inadequate for the present needs of of the hospital and would give no opportunity for expansion of the hospital in an emergency.

The commanding officer of the hospital states that—

> There is also needed a building for hydriatic, thermic, and mechano-therapy, etc. The stables and some of the storehouses are old, built by emergency methods, are unsuitable, and should be replaced by buildings especially constructed. A considerable allotment is also needed for the repairs of the roads and the improvement of the hospital grounds. This branch of work has not kept pace with the general improvement of the hospital, which is a well arranged, thoroughly equipped, and up to date hospital.

Excellent professional work has been done in all departments of the hospital, and no case of any kind among those entitled in any way to the professional care of the Medical Department has been refused admission.

Only two cases of typhoid were treated during the year. One, a woman, and one, a recruit, of less than a month's service at the time of admission to sick report. The commanding officer states that amebic dysentery has also become a rare disease, only six cases having been admitted during the year, and of these, five were old cases. He also states that the work of the disability board has been very

satisfactory. Increased care has been taken in obtaining evidence in all disability cases from every source, and he is of the opinion that the results have justified the necessarily increased amount of work.

The number of patients admitted during the year, including civilians and military convicts, was 2,972, being a decrease of 122 from the preceding year. There was 302 cases remaining in hospital, December 31, 1910, making a grand total of 3,274 patients treated in this hospital. Of this number 101 were officers, 2,771 enlisted men, 11 general prisoners, 202 male civilians, 189 female civilians. There were 1,628 medical, 887 surgical, and 759 venereal cases treated.

The daily average number of patients treated in hospital was 251.4 this being a decrease of 30 from the preceding year. Of this number 14.5 were officers, 213.2 enlisted men, 1.9 general prisoners, 13 male civilians, and 8.8 female civilians.

The average number of days in hospital was as follows:

	Officers.	Enlisted	Military convicts.	Civilians.		Total.	
				Male.	Female.	1911	1910
Medical	7.361	93.273	1.589	5.904	2.175	110.304	121+
Surgical	6.287	56.147	.084	5.200	6.523	74.243	85+
Venereal	.890	63.761	.205	1.934	.095	66.887	74+

The following tables show the movement of the sick, together with the principal causes of admission during the calendar year of 1911, civilians and general prisoners being included:

	States.	Islands.	Total.
Remaining in hospital, Dec. 31, 1910	242	60	302
Admissions:			
For gunshot wounds	6		
Diarrhea and dysentery	23	3	
Malarial fevers	18	1	
Typhoid fever	2		
Rheumatic affections	74	9	
Venereal diseases	634	16	
Injuries	358	8	
Insanity	48	37	
Alcoholism	79	2	
All other causes	1,534	116	
Undetermined	4		
Total admissions	2,780	192	2,972
Total to be accounted for			3,274
Dispositions:			
Returned to duty	2,209	60	
Died, all causes	36	6	
Discharged for disability	157	73	
Discharged per expiration	31	17	
Transferred to Government Hospital for the Insane	11	4	
Transferred to the Army and Navy General Hospital, Hot Springs		1	
Transferred to the general hospital, Fort Bayard	26	46	
Transferred to the Walter Reed General Hospital	6	2	
Transferred to other hospitals	2		
Otherwise disposed of	335	21	
Total dispositions for the year	2,813	230	3,043
Remaining in hospital, Dec. 31, 1911	209	22	231

There were 42 deaths during the year, the causes being as follows:

	Officers.	Enlisted men.	Civilians.	Total.
General diseases		3	3	6
Diseases of the nervous system and organs of special sense		2	1	3
Diseases of the circulatory system		1	2	3
Diseases of the respiratory system		8	5	13
Diseases of the digestive system		3	2	5
Nonvenereal diseases of the genito-urinary system and annexa		1	2	3
Diseases of the skin and cellular tissue			1	1
Old age			1	1
Affections produced by external causes		1		1
Total		19	17	36
Brought in dead:				
Diseases of the circulatory system		1	1	2
Affections produced by external causes		1	1	2
Ill-defined diseases		1		1
Died while on sick leave: Diseases of the nervous system and organs of special sense	1			1
Grand total	1	22	19	42

There were 230 discharges on certificates of disability, the causes being as follows:

General diseases	63
Diseases of the nervous system and organs of special sense	81
Circulatory system	9
Respiratory system	5
Digestive system	15
Genito-urinary system, nonvenereal	7
Diseases of the skin and cellular tissue	5
Bones and organs of locomotion	26
Condition due to external causes or violence	19
Total	230

There were 16 discharges each for chronic gonorrheal urethritis and gonorrheal arthritis. This was the greatest number of discharges for any one disease. There were 13 discharged for dementia praecox, 10 for constitutional psychopathic states, and 12 each for tuberculosis, chronic, pulmonary, and neurasthenia. Only three were discharged for syphilis.

The following table shows the "line of duty" for those discharged:

In line of duty		98
Not in line of duty:		
For diseases existing prior to enlistment	77	
For venereal diseases	35	
For alcoholism	6	
For affections produced by misconduct, including injuries produced by alcoholism	14	
Total		132
Discharged on certificate of disability		230

The following is a statement of the admissions and disposition of insane patients during the year ending December 31, 1911:

	Officers.		Enlisted men.		General prisoners.		Civilians.		Total, 1911.
	States.	Islands.	States.	Islands.	States.	Islands.	States.	Islands.	
Remaining Dec. 31, 1910			1	7			2		10
Total admissions during 1911	4	1	31	36	6		7		85
Total to be accounted for	4	1	32	43	6		9		95
Dispositions:									
Transfer to Government Hospital for the Insane	1		5	4	3		2		15
Transfer to homes for discharge on certificate of disability or release			1	9			1		11
Transfer to Walter Reed General Hospital	1								1
Returned to duty, cured or improved	2	1	6	3	1				13
Discharged on certificate of disability at this hospital			7	17					24
Discharged without honor (not on certificate of disability)			1						1
Discharged per expiration of service, having recovered				2					2
Died							2		2
Left hospital (released)							4		4
Total disposition during 1911	4	1	20	35	4		9		73
Remaining in hospital Dec. 31, 1911			12	8	2				22

An active surgical clinic is maintained at this hospital, the following being a condensed tabular statement of the surgical operations:

Operations.	Officers.	Enlisted men.	Total.	Retired enlisted men.	Civilians.	Grand total.
Cranium		1	1			1
Eye		4	4	1	1	6
Ear					2	2
Nose and throat	3	47	50		28	78
Face (other)		6	6		2	8
Neck		1	1			1
Upper extremity	2	15	17	2	7	26
Thorax		6	6		1	7
Abdomen (laparotomy)	5	90	95		60	155
Gynecological, external					73	73
Gynecological, internal					47	47
Lower extremity	6	41	47		11	58
Major, not included		1	1		1	2
Minor, not included	8	80	88		14	102
Total	24	292	316	3	247	566

In the woman's department 38 women were delivered at term and 17 incomplete abortions rendered complete. There were no maternal deaths and but 2 stillbirths; both of the latter were defectives. Podalic version was required once for transverse presentation. The child was saved. Other cases were normal. The gynecological clinic has covered the entire field of operative gynecology. The results seem to have been very satisfactory.

No deaths have been attributable to operation. There were 5 deaths during the year, but in each case the operation was too late to be of service, although done upon admission. The rule of immediate operation in cases of appendicitis has been followed as in 1910.

There were 109 appendectomies, with 1 death, a child of 18 months, admitted with a gangrenous ruptured appendix and acute septic general peritonitis. The case was immediately operated upon, but was already several days too late.

A large laboratory is maintained for the use of the hospital and for the special work of the posts on the Pacific coast. The report of the work done will be found under the general heading of "Laboratories." The mean strength of the personnel on duty at this hospital for the year was: Officers, 11.6; Army Nurse Corps, 39.8; post noncommissioned staff, 2; Hospital Corps, 166.6; Signal Corps, 1; and civilian employees, 21.

Field Hospital No. 2 and Ambulance Company No. 2, with an average daily strength, respectively, of 96.6 and 30.4, were also stationed at this hospital.

WALTER REED GENERAL HOSPITAL.

This is the general hospital at Washington, D. C., and also serves as a post hospital for Washington Barracks, D. C., an auto ambulance conveying the patients to the hospital from the post at sick call and answering emergency calls.

No new buildings were constructed during the year other than those mentioned in the last annual report of this office. Many improvements were made to the grounds during the year; these consisted in the planting of trees (Norway maples, 135 in number), making and seeding lawns, grading and draining, planting of hedges the entire length of Georgia Avenue boundary of the reservation and around officers' and noncommissioned officers' quarters, the planting of bushes and other flowering shrubs and plants, and the repair and maintenance of roads with road metal. Practically all of these improvements were effected by the labor of troops. The replacing of 5 arc lights by 15 incandescent street lamps has resulted in a better lighting of the walks about the post. Money has been allotted for the erection of a contagious disease hospital and a building containing kitchens and mess halls. The erection of the latter structure will remove the odors of cooking, which now permeate the entire building, and will furnish adequate dining-room accommodations for the Hospital Corps detachment which are at present greatly restricted.

The following new buildings are urgently needed: Barracks for the Hospital Corps detachment, with gymnasium and exchange, two sets of quarters for married and one set for bachelor officers, one double set of noncommissioned officers' quarters. In regard to the barracks for the Hospital Corps with the gymnasium and exchange the commanding officer states that—

"Part of the Hospital Corps detachment is quartered in the attic of the hospital proper, the remainder in the barracks of Field Hospital No. 3. The attic of the hospital was not originally intended to be used as quarters and is but a makeshift. It is excessively hot in summer and illy ventilated in winter. There is no room available at the post where the enlisted men can gather for recreation, amusement, or reading. Some such place is especially desirable for an organization like the Field Hospital, which is largely composed of recruits. It would tend to contentment and aid in maintaining discipline. A building containing gymnasium, rooms for a post exchange, and a dormitory for the Hospital Corps detachment on duty at the hospital proper is recommended.

The number of cases admitted during the year, including retired officers and enlisted men and civilians, was 565, this being a decrease of 29 from the preceding year. Of this number 58 were officers, 401 enlisted men, 13 retired officers, 40 retired and discharged soldiers, 52 civilians, and 1 army nurse. There were no general prisoners admitted during the year. Three hundred and eighty-six of these cases were medical and 179 were surgical.

The daily average number of patients was as follows: Officers, 11.5; enlisted men, 34.6; retired officers, 0.7; retired and discharged soldiers, 2.8; civilians, 2; Army Nurse Corps, 0.005; total, 51.6, this being a decrease of 3.2 from the preceding year.

The following table shows the movement of the sick, together with the principal causes of admission, during the calendar year 1911, civilians being included:

Remaining on sick report Dec. 31, 1910		57
Admissions:		
For diarrhea and dysentery	8	
For malarial fevers	35	
For typhoid fever	6	
For rheumatic affections	13	
For venereal diseases	87	
For injuries	81	
For insanity	3	
For alcoholism	15	
For all other causes	317	
Total admissions during the year		565
Total admissions to be accounted for		622
Dispositions:		
Total returned to duty	398	
Discharged for disability	27	
Discharged for expiration of term	9	
Deaths from all causes	10	
Deserted	1	
Transferred to other general hospitals	23	
Otherwise disposed of	103	
Total dispositions during the year		571
Remaining on sick report Dec. 31, 1911		51

There were 9 deaths; of this number 3 were enlisted men, 3 retired officers, and 3 retired soldiers. The causes were as follows: Sarcoma, left, superior maxilla; intestinal obstruction; typhoid fever; carcinoma of the tongue and pharynx; carcinoma intestinal; nephritis (3); pneumonia, lobar.

There were 27 men discharged on certificate of disability for 18 different causes, as follows: Result of fractures, 4; defective hearing, 3; diabetes mellitus, 3; defective vision, 2; nephritis, 1; muscular rheumatism with senility, 1; loss of leg, 1; coxitis, tubercular, 1; paralysis, 1; defective feet, 1; defective teeth, 1; leukemia, 1; hernia, 2; hysteria, 1; abscess of liver, 1; articular rheumatism, 1; fracture of spine, 1; and osteo-arthritis of spine, 1.

An active surgical clinic is maintained at this hospital. The following is a statement of surgical conditions for which operations were performed:

Appendicitis	21	Dislocation, eleventh dorsal vertebra	1
Hernia	16	Ostitis	2
Hepatic abscess	4	Sarcoma, left upper maxillary region	1
Colitis amœbic	1	Dislocation acromio-clavicular articulation, left	1
Empyema	1	Osteoma	1
Habitual dislocation, right shoulder joint	1	Osteoperiostitis	1
Exophthalmic goiter	1	Amputations	1
Intestinal obstruction	1	Diseases of eye, ear, and nose	37
Tubercular peritonitis	1	Diseases of the mouth, pharynx, and œsophagus	57
Cirrhosis of liver	1	Diseases of anus and rectum	10
Carcinomatosis, abdominal	1	Diseases, genito-urinary	9
Fæcal fistula	1	Diseases of skin and cellular tissue	17
Biliary fistula	1	Diseases of lymphatics	15
Cholelithiasis	1	Diseases of neck and thorax	1
Cholecystitis	1	Diseases, gynecological	9
Aneurism (Matas operation)	1	Others	6
Villous arthritis	3		
Fractures, and results of	8		

The average number of medical officers on duty during the year was 7, and of enlisted men 66. A field hospital was stationed here during the year, as well as an ambulance company, which latter was, however, transferred to Fort Leavenworth during the summer of 1911.

The following is a tabular statement of work done in the laboratory during 1911:

Examinations of urine	820
Examinations of blood	362
Examinations of feces	139
Examinations of sputum	80
Total examinations during year	1,401

GENERAL HOSPITAL, FORT BAYARD, N. MEX.

This hospital is for the treatment of cases of pulmonary tuberculosis in the Army. Fort Bayard is situated in the southwestern part of New Mexico. The reservation originally extended about 4 miles north and south and 3 miles east and west and had an area of approximately 13½ square miles. Several years ago it was enlarged by the purchase of land to the north and by the addition, through executive order, of various tracts of public land, the object of the enlargement being the more perfect protection of the watershed and the acquisition of additional water. On the north the land rises rapidly, reaching the height of 9,000 feet at Black Peak, about 8 miles from the post. In this direction the surface is broken by rocky hills covered with pinyon, juniper, and western yellow-pine trees. The country is picturesque, and fine views are to be had from the hills. To the south the valleys widen into vast treeless plains.

The feature which constitutes the peculiar excellence of the climate of Fort Bayard and distinguishes it from other parts of the Rocky Mountain Plateau is its relative equability. The climate is such that out-door life is pleasant throughout the year. Two factors contribute to secure this result—the altitude and the geographical position. The altitude, 6,165 feet, prevents excessive heat; the hot plains of a lower elevation which surround on all sides the moun-

tainous region in which Fort Bayard is situated, temper the cold winds of winter and prevent excessive cold.

The buildings reported under construction in the last annual report have all been completed. The commanding officer of this hospital reported in his annual report for 1911 that for the first time during a number of years no construction was in progress at the hospital.

The number admitted during the year, including beneficiaries of the Soldiers' Home, civilians, and general prisoners was 624, this being a decrease of 147 from the preceding year. There were 220 remaining in hospital December 31, 1910, making a total of 844 treated during the year. Of this number 24 were officers, 304 enlisted men, 1 general prisoner, 74 civilians, and 441 beneficiaries of the Soldiers' Home. There were 806 medical cases and 38 surgical cases treated.

The daily average number of patients was 221.2, this being an increase of three over the preceding year. Of this number 11.3 were officers, 77.1 enlisted men, 115.3 beneficiaries of the Soldiers' Home, and 14.5 civilians.

The following tables show the movement of the sick during the year, with principal causes of admission and disposition:

	Officers, enlisted men, and civilians.	Beneficiaries of Soldiers' Home.	Total.
ADMISSIONS.			
For tuberculosis	192	314	506
For gunshot wounds	1	.....	1
For diarrhea and dysentery	4	.....	4
For rheumatic affections	4	.....	4
For venereal diseases	20	.....	20
For injuries	22	.....	22
For alcoholism	3	.....	3
For all other causes	64	.....	64
Total admissions during 1911	310	314	624
Remaining in hospital on Dec. 31, 1910	94	126	220
Total to be accounted for	404	440	844
DISPOSITIONS.			
Left hospital	.....	260	260
Returned to duty	136	.....	136
Discharged for disability	135	.....	135
Discharged by expiration of term of service	2	.....	2
Deaths from all causes	18	21	39
Transferred to other general hospitals	3	.....	3
Otherwise disposed of	27	.....	27
Total dispositions, 1911	321	281	602
Remaining in hospital Dec. 31, 1911	83	159	242
Total to be accounted for	404	440	844

The causes and number of deaths which occurred at this hospital during the year appear in the following table:

Causes.	Officers.	Enlisted men.	Beneficiaries Soldiers' Home.	Civilians.	Total.
Nephritis, tuberculous, chronic	.....	.....	1	.....	1
Pneumonia, lobar	.....	.....	.....	1	1
Tuberculosis, miliary, general, acute	1	.....	.....	1	2
Tuberculosis, pulmonary, chronic	.....	10	20	5	35
Total	1	10	21	7	39

The following is a statement of discharges from the Army, with causes, not including Hospital Corps detachment on duty at this hospital:

Causes.	Officers.	Enlisted men.
By expiration of term of service		2
For disability, as follows:		
Pulmonary tuberculosis		132
Pleurisy, tuberculous		1
Cystitis, tuberculous		1
Empyema, chronic		1
Total		137

There were 48 surgical operations performed during the year. Of this number 47 were successful, with one failure, and without a death. The following is a condensed statement:

Genito-urinary	13	Skin and cellular tissues	5
Anus and rectum	4	Mouth and pharynx	7
Abdomen	8	Others	6
Thorax	5		

The laboratory work done during the year may be itemized as follows:

Examinations of sputum	8,204
Examinations of urine	5,499
Examinations of blood	1,108
Tuberculin tests, bovine	124
X-ray examinations and photography	21
Miscellaneous examinations	62
Autopsies, human	34
Autopsies, bovine	19
Histological examination of post-mortem tissue	184
Others	128

The mean strength of the personnel on duty at this hospital for the year was 11.1 medical officers, other officers 2.5, Army Nurse Corps, 17.87, Hospital Corps 118.34, and Signal Corps 1.

The following table shows the result of treatment in all cases of pulmonary tuberculosis:

Class.	Number.	Apparently cured.		Arrested.		Improved.		Unimproved.		Died.	
		Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.
Incipient	33	3	9.09	2	6.06	25	75.75	2	6.06	1	3.03
Moderately advanced	303	9	2.97	14	4.66	228	75.24	46	15.14	6	1.98
Far advanced	254			1	.39	157	61.81	68	26.77	28	11.00
Acute miliary	2									2	100.00
Total	[1] 592	12	2.02	17	2.87	410	69.25	116	19.59	37	6.25

[1] Includes 83 cases under treatment one month or less. Does not include 5 cases which were only treated for a few days.

The result of treatment in completed cases of pulmonary tuberculosis was as follows:

Class.	Number.	Apparently cured.		Arrested.		Improved.		Unimproved.		Died.	
		Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.
Incipient	16	3	18.75	2	12.50	9	56.25	1	6.25	1	6.25
Moderately advanced	196	9	4.59	14	7.14	138	70.40	29	14.79	6	3.06
Far advanced	144	.....	.....	1	.69	88	61.11	27	18.73	28	19.44
Acute miliary	2	.....	.....	.....	.....	.....	.....	.....	.....	2	100.00
Total	[1] 358	12	3.35	17	4.75	235	65.64	57	15.92	37	10.33

[1] Includes 43 cases under treatment one month or less.

The number of completed cases of pulmonary tuberculosis was 358. Important complications were present in 126 cases, as follows:

Tuberculous laryngitis in	38
Pleurisy with effusion in	4
Alcoholism in	3
Syphilis in	23
Empyema in	3
Pyopneumothorax in	2
Tuberculous orchitis and epididymitis in	3
Addison's disease in	3
Tuberculous enteritis in	16
Tuberculous fistula in ano in	4
Tuberculous otitis in	9
Valvular disease of the heart in	2
Tuberculous meningitis in	3
Tuberculous disease of hip joint, of sacro-iliac joint, of shoulder joint, of ilium, tuberculous cervical adenitis, tuberculous inguinal adenitis, tuberculous cystitis, tuberculous meningo-myelitis, nephrolithiasis, tuberculous pyo-nephrosis, chronic amœbic dysentry, cirrhosis of the liver, and dementia praecox, each	1

From the following table, which shows the length of treatment of cases which terminated fatally, it is clearly apparent that comparatively few of the deaths at this institution occur in cases which would be considered as suitable for sanatorium treatment, 10 patients having died within the first month and 16 within four months after admission or readmission in a total of 37 deaths:

	Weeks.				Months.			Years.					Total.
	1	2	3	4	1–4	5–8	9–12	1	2–3	4–5	6–7	8–9	
Time of death of cases under continuous treatment	1	.....	1	.....	10	7	2	2	.....	.....	.....	.....	23
Time of death of cases not under continuous treatment:													
(a) Reckoned from last admission	5	1	1	1	6	.....	.....	.....	.....	.....	.....	.....	14
(b) Reckoned from original admission	.....	.....	.....	.....	.....	.....	2	5	2	2	2	1	14
Total	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	37

ARMY AND NAVY GENERAL HOSPITAL, HOT SPRINGS, ARK.

This hospital is intended especially for patients having diseases in which hydrotherapeutic treatment is indicated. Paragraph 1459, Army Regulations, as amended by General Order 174, War Department, 1910, states that—

> The Army and Navy General Hospital, Hot Springs, Ark., is under the direction of the Secretary of War, and is devoted to the treatment of the officers and enlisted men of the military and naval service of the United States, cadets at the United States Military and Navy Academies, officers of the Revenue-Cutter Service, officers of the Public Health and Marine-Hospital Service, and honorably discharged soldiers and sailors of the Regular and Volunteer Army and Navy of the United States for such diseases as the waters of the hot springs of Arkansas have an established reputation in benefiting.

Some improvements and additions were made during the year. A modern brine-system plant for cold storage has been installed in a small detached building near the power house, and the old plant removed from the basement of the hospital. An automatic "push-button-control" electric elevator has replaced the old hydraulic one in the administration building. Two new engines, two dynamos, and a triplex electric pump were installed. An addition has been built to the power house which, besides doubling its capacity, provides space for a disinfecting room, mortuary, carpenter shop, paint shop, engineer's and plumber's storeroom, and for an enlargement of the laundry. The grounds have been improved, new sidewalks and drains laid, and a new road constructed from the barn to the crematory.

The following recommendations of the commanding officer in regard to new construction are concurred in by this office:

> That the capacity of the hospital be increased from 122 to 300 beds, which will entail an expenditure of approximately $420,000, distributed as follows:

Officers' hospital, containing one 18-bed ward and 18 private rooms, with operating room, baths, and all equipment and furniture	$100,000
Three-story veterans' ward	60,000
Adding another story to wards 1 and 2	40,000
Gymnasium, with bowling alleys, shower baths, amusement hall, and post exchange	40,000
Hospital Corps barracks	40,000
Three double sets noncommissioned officers' quarters	30,000
Increasing size of bathhouse and renovating and equipping same	50,000
Increasing size of stables	7,000
Lowering elevator shaft in ward 3 to level of bathhouse, constructing passage between the two buildings, and installing electric elevator	8,000
Storehouse for quartermaster's and medical supplies and subsistence stores	20,000
Refrigerating plant for cooling hot water for bathing	15,000
Roads, walks, and grading	10,000
Total	420,000

The additions most urgently needed are the officers' hospital, Hospital Corps barracks, and the nurses' home, which should be provided even if the capacity of the hospital be not increased as recommended.

During the year 746 cases were admitted, this being an increase of two over the preceding year. Of this number 30 were officers, 105 enlisted men, and 611 civilians, chiefly veterans of the Civil War, admitted in accordance with the law. The daily average number of patients was 83.27. Of this number 5.01 were officers, 12.04 enlisted men, and 66.22 civilians.

The following table shows the movement of sick, together with the principal causes of admission, during the calendar year 1911:

Remaining in hospital Dec. 31, 1910	107
Admissions:	
Diseases of the respiratory system	7
Diseases of the heart	30
Diseases of the urinary system	35
Dysentery	6
Rheumatism, articular	195
Rheumatism, muscular	46
Sprains and muscular strains	5
Gastritis	13
Diseases of the kidneys	39
Arthritis	47
Syphilis and results	11
Gonorrhea and results	14
Carcinoma of stomach	4
Diseases of the circulatory system	70
Malarial affections	12
Injuries	14
All other causes	198
Total in hospital during year	853
Dispositions:	
Returned to duty	107
Died	11
Discharged on certificate of disability	12
Discharged per expiration of term of service	2
Transferred	4
Discharged from hospital (civilians)	601
Otherwise disposed of	1
Remaining Dec. 31, 1911, in hospital	115
	853

There were 11 deaths during the year. Of this number 2 were officers, 2 enlisted men, and 7 civilians. The following table shows the causes of deaths:

Chronic interstitial nephritis	3
Chronic parenchymatous nephritis	2
Atrophic cirrhosis of liver	1
Carcinoma of stomach and liver	1
Broncho-pneumonia	1
Mitral regurgitation	1
Acute ulcerative endocarditis	1
Chronic endocarditis and mitral regurgitation	1
Total	11

There were 12 discharges on certificates of disability. The following is a list of the causes:

Nocturnal epilepsy	1
General paresis	1
Chronic amebic dysentery	1
Ankylosis of knee joint	1
Chronic articular rheumatism	1
Chronic parenchymatous nephritis	2
Tuberculous arthritis	1
Paralysis of thigh muscles, result of poliomyelitis	1
Chronic arthritis	1
Shortening of thigh and ankylosis of knee, following fracture of femur	1
Chronic alcoholism	1
Total	12

The surgical clinic at this hospital is small. During the year 25 operations were performed, all of which were successful. The following is a statement of the laboratory work done:

Blood examinations	13
Feces examinations	31
Sputa examinations	8
Urine examinations	955
Total	1,007

The mean strength of the command for the year was: Medical officers, 4; Army Nurse Corps, 4.9; post noncommissioned officers, 1; enlisted men, Hospital Corps, 55.33.

DIVISION HOSPITAL, MANILA, P. I.

This hospital is the general hospital for the Philippine Islands. It differs from the general hospitals in this country in that it is not directly under the control of the Surgeon General, but owing to its geographic location it is under the authority of the division commander.

A good many improvements in the hospital buildings and grounds were made during the year:

1. The lawns in front of the hospital, which were so low that during the wet season water was standing on them almost constantly, sometimes from 6 to 20 inches deep, have been raised by filling in with over 1,000 cubic yards of soil, and sodded.

2. Hedge plants have been set out in front of the hospital, and when grown will replace the iron fence. A large number of palms, flowering and foliage plants have been set out in the hospital grounds.

3. The post exchange building has been overhauled, repaired, painted, and a new floor laid. The facilities for the recreation of patients have been much improved. Several hundred dollars have been expended for furniture and musical instruments, many periodicals subscribed for, and hundreds of modern works of fiction added to the library.

4. A new stable for 20 animals, conforming with city ordinances as to cement floors, drains, and sewer connections, has been completed.

5. The hospital sewer system has been connected with that of the city. The plumbing fixtures have been in several instances overhauled and some new fixtures installed.

6. The quartermaster's department of the hospital has been assigned rooms in a pavilion which has been repaired and rearranged so as to answer admirably all necessities.

7. Extensive repairs have been made to roofs.

8. The old band stand in the interior court has been thoroughly repaired, new concrete floor laid, new ceiling put in, door repainted, and it has been converted into a room for the use of boards for physical examinations of patients and for enlistment.

9. Extensive interior painting in the hospital has been done.

10. A new concrete floor has been laid in a portion of the kitchen and many sections of the wooden floors relaid in various parts of the hospital.

11. A new linen room has been constructed, with suitable shelves.

12. The rooms occupied by the tropical board have been improved by additional interior fittings, and a dust-proof room built in which the typhoid prophylactic is prepared.

13. An animal "farm" or "warren" has been put in operation. Ordinarily all the demands for guinea pigs and rabbits of the hos-

pital laboratory and the tropical board can be met by this "farm." Sheep and monkeys are also kept for use of these laboratories.

In regard to new construction, the commanding officer states that—

As General Orders, No. 30, War Department, 1911, publishes an Executive order setting aside for military purposes the reservation on which the hospital stands, it is believed that steps should be taken to construct a new modern 2-story concrete pavilion hospital on the present site, replacing the old Spanish structure which is in need of constant repair. Probably $250,000 or more would be required for a new suitable hospital. It might be deemed advisable to construct a portion of a completely planned new hospital each year until the whole structure is completed.

He states in regard to improvements needed that the facilities and accommodations for maternity cases are most inadequate.

As the admission and treatment of these cases is authorized, suitable provision should be made for their proper care and management. The conditions which now exist cause complaints and criticisms which are justified but unavoidable. It has been estimated that for about $1,600 a second story can be built over a portion of the women's ward which would relieve the situation and make possible more suitable management of these cases. A second story should also be built for use of the tropical board, over a portion of the building used as a squad room for the Hospital Corps detachment. The important work and far-reaching results achieved by this board merit at least the recognition of suitable workrooms, office rooms, and laboratory. The various departments of the hospital are scattered over such an area that an intercommunicating telephone system would be of the greatest convenience in administration. It is recommended that a 20-phone system be installed.

The number admitted during the year, including native troops and civilians entitled to treatment in the hospital, was 2,519, an increase of 121 over the preceding year. Of this number, 1,620 were medical cases and 899 surgical. There were officers, 150; enlisted men (American), 1,625; native troops, 55; and civilians entitled to treatment, 689. The daily average of patients in hospital was 120.29, this being a decrease of 18.28 from the preceding year. Of this number, 6.72 were officers, 84.17 enlisted men (American), 5.39 Philippine scouts, and 23.81 civilians.

The following table shows the movement of the sick, together with the principal causes of admission during the calendar year of 1911:

	Officers.	Enlisted men (Americans).	Scouts.	Civilians.
ADMISSIONS.				
For gunshot wounds	1	7		1
Diarrhea and dysentery	1	25	1	18
Malarial fever	7	13	4	4
Typhoid fever		1	2	1
Rheumatic affections	3	26		5
Venereal diseases	7	412	2	35
Injuries	6	143	2	73
Insanity	2	45	6	7
Alcoholism	1	35		4
All other causes	122	918	38	541
Total	150	1,625	55	689
Total admissions during the year				2,519
Remaining in hospital Dec. 31, 1910				137
Total to be accounted for				2,656
DISPOSITIONS.				
Returned to duty	120	1,395	27	27
Discharged for disability			26	
Discharged per expiration		9	2	
Discharged, unsuited for service			1	
Deaths from all causes		7	2	6
Transferred to other hospital	27	234		14
Otherwise disposed of				652
Total	147	1,645	58	699
Aggregate				2,549
Remaining in hospital Dec. 31, 1911				106
Remaining in quarters Dec. 31, 1911				1

There were 15 deaths during the year as compared with 22 for 1910. The following were the causes:

Appendicitis, perforated, with general peritonitis.
Broncho-pneumonia.
Cerebral embolism.
Dilatation of heart (mitral disease).
Fracture of vertebræ, cervical.
Hemorrhage, internal (gastric ulcer).
Nephritis.
Peritonitis, due to injury causing rupture of intestine.
Puerperal eclampsia.
Sarcoma of rectum with general peritonitis.
Shock, following dislocation of right hip and fracture, left leg.
Shock, following operation (introsusception).
Suicide, poisoning by carbolic acid.
Sudden death, natural causes.
Tuberculosis, pulmonary.

Included in this number were 7 enlisted men (American), 2 Philippine Scouts, and 6 civilians. The single death for pulmonary tuberculosis was in the case of a civilian.

American soldiers are not discharged for disability in the Philippines except in very rare cases, and there were none thus discharged in 1911. All the native enlisted men physically disabled for the service are discharged in the islands. The following table shows the number discharged at this hospital during the year, with causes:

Discharged on certificates of disability (Philippine Scouts):	
Ankylosis, elbow joint	1
Faulty union, tibia and fibula	1
Filariasis	1
Leprosy	2
Loss of right hand (amputation)	1
Mental depression and insanity	8
Optic atrophy	1
Retrobulbar neuritis	1
Tuberculosis, pulmonary	10
Total	26

There were 35 discharged in 1910.

An active surgical clinic is maintained. The following is a statement of surgical conditions for which operations were performed:

Appendicitis	60	Elephantiasis scrotum and penis	1
Hernia	10	Epithelioma	1
Cholecystitis	1	Cellulitis	2
Intussusception	1	Adenitis	42
Puerperal eclampsia	1	Ankylosis	2
Sarcoma rectum	1	Diseases, gynecological	51
Perinephritis	1	Diseases, genito-urinary, male	35
Mastoiditis	2	Diseases of nose and throat	2
Hepatic abscess	1	Diseases of the feet	10
Pulmonary abscess	1	Diseases of the anus and rectum	22
Other abscesses	7	Diseases of the veins	8
Detached cartilage knee	5	Wounds	7
Dislocation, recurrent, shoulder	2	Others	54
Division musculospiral nerve	1		

There were 5 deaths following operations. These deaths were included in the list above and were due to appendicitis, intussusception, spinal fracture, sarcoma of rectum, and puerperal eclampsia.

In the eye, ear, nose, and throat department there were 5,924 cases treated, 477 refractions, and 170 operations.

The following is a condensed tabular statement of the work done in the laboratory:

Examinations made in the pathological laboratory from January 1 to December 31, 1911.

Blood examinations	2,594
Wassermann reactions	3,485
Urine examinations	1,542
Feces examinations	2,247
Sputum examinations	1,436
Smears and cultures	144
Sections	38
Autopsies	13
Animal inoculations and dissections	17
Chemical, biological, and miscellaneous examinations	1,447

The average number of medical officers on duty was 10; dental surgeons, 2; nurses, 20; and Hospital Corps men, 97.

PROVIDENCE HOSPITAL.

The act approved March 4, 1911, having appropriated $19,000 for the support and medical treatment of destitute patients in the city of Washington, D. C., under contract to be made with Providence Hospital by the Surgeon General of the Army, the relief afforded was as follows:

Patients in hospital, July 1, 1911	96
Admitted during the year	1,275
Total number treated	1,371
Average number admitted per month	114
Number remaining in hospital June 30, 1912	87
Total number of days' treatment afforded	33,836
Average number of days' treatment per patient	25
Average number of patients treated per day	92
Longest term of treatment (days)	366
Shortest term of treatment (days)	1
Number of patients in hospital during the whole year	1

LABORATORIES.

ARMY MEDICAL SCHOOL.

No changes of importance have been made in the laboratories during the past year. The equipment of the typhoid vaccine laboratory has been increased until it is now possible to manufacture 25 liters of the vaccine each week. The demand for other vaccines has increased, particularly for gonococcus and staphylococcus vaccines, and it has been necessary to make them in larger quantities than heretofore.

Several temporary but no chronic typhoid bacillus carriers were found during the year. Before returning typhoid convalescents to duty it is a rule to examine their urine and feces for typhoid bacilli and at least three negative examinations are considered necessary for the exclusion of both temporary and chronic bacillus carriers.

Summary of laboratory work in the laboratories of the Army Medical School for the year ending Dec. 31, 1911.

Examinations of typhoid cases	776
Convalescents examined:	
Positive	5
Negative	18
Suspected carriers or contacts examined:	
Positive	11
Negative	57
Widals:	
Positive	33
Negative	42
Blood cultures:	
Positive	4
Negative	26
Blood cultures from clots:	
Positive	1
Negative	32
Examination of feces for *B. typhosus:*	
Positive	24
Negative	69
Examination of urine for *B. typhosus:*	
Positive	1
Negative	53
Examination of feces for *B. paratyphosus:*	
Positive	0
Negative	3
Examination of feces for *B. dysenteriæ:*	
Positive	0
Negative	13

Clinical laboratory examinations for year ending Dec. 31, 1911.

Blood counts		168
Differential counts		94
Malaria		113
Urinalysis		184
Sputa for T. B.		77
Feces		124
Water, bacteriological examination		171
Cultures of pus, exudates, etc		225
Animal inoculations for immune sera, diagnosis, etc		286
Histological examinations of operative and post mortem tissues		483
Miscellaneous examinations, gonococcus, etc		303
Autogenous vaccines prepared		34
Stock staphylococcus vaccine	cubic centimeter	822
Stock streptococcus vaccine	do	216
Stock pneumococcus vaccine	do	24
Stock gonococcus vaccine	do	1,297
Wassermann examinations		6,189
Positive		1,978
Negative		1,322
Reexaminations		2,889
Examination for the treponema pallidum:		
Positive		27
Negative		18
Treatment with salvarsan		111
Treatment by bacteriological vaccines		695

TYPHOID FEVER PROPHYLACTIC.

The typhoid prophylactic has been prepared in the laboratory of the Army Medical School as heretofore, and no change of importance has been made in its method of preparation.

During the calendar year 1911 the following quantities of the typhoid prophylactic were sent out from this laboratory:

Typhoid prophylactic shipped, calendar year 1911.

	Cubic centimeters.
Navy	50,625
Army	237,540
National guard	22,241
Civilians and civil institutions	6,692
	317,098

For the first six months of 1912 the issues of typhoid prophylactic from this laboratory were as follows:

First six months 1912:	Cubic centimeters.
Navy	153,408
Army	87,387
National Guard	23,136
Civilians and civil institutions	1,306
Various Government departments	1,581
	266,818

The large quantity used by the Navy was due to the adoption by that department of compulsory vaccination against typhoid fever.

During the year considerable experimental work has been undertaken with filtrates of cultures of the typhoid bacillus and with various strains of the bacillus, in the production of antibodies in animals. This work is as yet incomplete but would seem to indicate that the vaccine as prepared in this laboratory is more efficient than that prepared from filtrates of the organism.

STUDIES IN SYPHILIS.

The work on syphilis referred to in last year's report has been continued and extended. The spirochætæ of syphilis and yaws have been carried on in rabbits, and thanks to Dr. Noguchi cultures of these organisms, as well as of other spirochætæ have been on hand for demonstration and study. The value of the "luetin test" as supplementary to the Wassermann reaction is being investigated. Work with specific antigens will be referred to later.

In regard to salvarsan, the conclusions reached have been the following: the drug is not toxic in the usual doses; the intravenous method of administration is the one of choice; salvarsan is a specific spirochætecide and controls the symptoms of syphilis by killing the organisms; in most cases the treatment has not been vigorous enough and in some cases has resulted in relapses affecting the nervous system; in the primary stage the minimum adopted for radical cure is two doses, combined with a thorough course of mercury; in the secondary stage the minimum is four doses combined with mercury; a great deal of salvarsan has been wasted by giving an occasional dose without any definite plan of treatment; the conditions of the service offer a very favorable field for the study of syphilis and salvarsan, and advantage should be taken of the opportunity.

In April, 1912, Prof. Ehrlich sent the laboratory a generous supply of neosalvarsan for trial, and the results have been very favorable. The action of the new preparation in animals and in patients is as good as that of the old preparation, and the toxicity seems less, while the ease of preparation is a considerable recommendation.

Complement fixation with specific antigens.—During the year experiments have been undertaken to determine the complement fixation power of pure cultures of spirochætes used as antigens. Through the kindness of Dr. Noguchi pure cultures of *Spirochæta pallida*, *Spirochæta pertenuis*, and *Spirochæta microdentium* were obtained and antigens were prepared from transplants of these

cultures. The antigens used were alcoholic extracts and were employed in the same manner as similar extracts in the regular Wassermann test. The results may be briefly summarized as follows: Complement fixation in syphilis can be obtained in certain sera with an alcoholic extract of pure cultures of *Spirochæta pallida*, but antigens prepared from pure cultures of *Spirochæta pertenius* and *Spirochæta microdentium* will also give positive reactions with certain syphilitic sera. These spirochæte antigens do not give complete fixation with serum from normal individuals, and of 38 specimens of serum from as many patients suffering from diseases other than syphilis only one gave a weak reaction. The results with the specific antigens were compared with those obtained with an alcoholic extract of fœtal syphilitic liver which is used in our regular Wassermann tests and it was found that the specific antigens gave slighter weaker reactions as a rule. The results with the *pallida* antigen approached most closely those obtained with the stock antigen, but were generally weaker, and in some undoubted syphilitic cases, where the stock antigen gave strong reactions, the *pallida* antigens gave a negative result. The results obtained with the *microdentium* antigens were almost identical with those obtained with the *pallida* antigens and the *pertenius* closely approximated the results obtained with the others. Our experimental work suggests that the complement fixation reaction obtained in syphilis with antigens made by alcoholic extraction of pure cultures of spirochætes is a group reaction, and proves that such antigens are very much inferior, from a practical standpoint, to those obtained by alcoholic extraction of a fœtal syphilitic liver. The specific antigens we worked with could not be depended upon in the diagnosis of syphilis by the complement fixation test.

REPORT UPON WASSERMANN TESTS.

During the calendar year ending December 31, 1911, there were 6,189 Wassermann tests made. Of these 1,978 gave a positive result, 1,322 a negative result, and 2,889 were reexaminations.

In the last annual report of the Surgeon General a detailed report was made of the Wassermann tests for the year ending June 30, 1911. The following is a detailed report of this work for the year ending June 30, 1912:

The total number of cases examined was 4,357. Of these cases 1,545 were diagnosed as syphilis, of which 1,334 gave a positive result. The diagnosis was other than syphilis in 651 cases, of which 649 gave a negative result. In two cases diagnosed as pityriasis rosea the test gave a weak positive reaction. Reexaminations comprised 2,161 of the total number reported.

As regards the stage of the disease, the following results were obtained in 1,513 cases diagnosed as syphilis. Fourteen cases in which the test was made at a period too early for the reaction to have appeared and 18 cases which had received enough treatment for a positive reaction to have become negative have been deducted from a total of 1,545 cases diagnosed as syphilis in compiling this table.

TABLE No. 1.—*Result of the Wassermann test in cases diagnosed as syphilis from June 30, 1911, to July 1, 1912.*

Stage of disease.	Number of cases.	Positive.	Negative.	Per cent positive.
Primary	338	292	46	86.3
Secondary	625	598	27	95.8
Tertiary	189	170	19	89.9
Latent	343	259	84	75.5
Congenital	9	8	1	88.8
Parasyphilitic	9	7	2	77.7
Total	1,513	1,334	179	88.1

It is interesting to consider briefly the results obtained with this test from the time of its adoption in this laboratory, November 1, 1909, to the present date, June 30, 1912.

The total number of tests made has been 8,511. The total number of individuals examined to June 30, 1912, has been 4,631, while 3,880 repetitions of the test have been made, generally as a control of treatment. Of the 4,631 individuals examined 2,665 gave a positive reaction and 1,966 a negative reaction. Of the total number, 3,206 were cases in which the clinical diagnosis was syphilis or suspected syphilis, or in which there was a clear history of infection (this includes latent cases); 1,269 were cases in which the clinical symptoms or diagnosis were of some other disease; while 156 were normal individuals in whom the tests were made in research work.

Syphilitic cases.—Table 2, which follows, gives the results obtained in the cases in which syphilis was diagnosed or the symptoms or history were suggestive of that disease. As 67 individuals were tested in the primary stage of the disease at a period too early for the reaction to have appeared and as 55 of the secondary cases giving a negative result had been treated sufficiently for the reaction to have disappeared, it is only just that these cases should be deducted from the table if one desires a true statement of the results obtained with the Wassermann test at this laboratory, and this has been done.

TABLE No. 2.—*Result of Wassermann test in 3,084 cases of syphilis.*

Stage of disease.	Number of cases.	Positive.	Negative.	Per cent positive.
Primary	578	511	67	88.4
Secondary	1,311	1,256	55	95.8
Tertiary	406	355	51	87.4
Latent	739	487	252	65.8
Congenital	28	25	3	89.2
Parasyphilitic	22	15	7	68.1
Total	3,084	2,649	435	85.8

A brief consideration of this table is of interest as showing the relative percentage of positive reactions in the various stages of syphilis.

Results in primary stage.—All cases have been considered as primary that have presented the initial lesion or that were tested before the development of secondary symptoms. In 578 primary cases, 511, or 88.4 per cent gave a positive result. This percentage agrees with

that of most observers who have handled a large number of primary cases. Several cases have been observed in which the reaction did not appear until the secondary stage, and we believe that it can be considered as proven that at least 10 per cent of primary cases do not give a positive reaction.

Results in secondary stage.—Only cases which have presented active symptoms of the secondary stage have been considered in the compilation of the table. Of this class of patients 1,311 were tested, with a positive result, in 1,256, or 95.8 per cent. In 4.2 per cent the reaction was negative and in many of these cases the test was repeated several times. It must be admitted, therefore, that some patients presenting active symptoms of the secondary stage of syphilis do not develop a positive Wassermann reaction during this stage so far as we have been able to follow the cases. In our experience, about 5 per cent of secondary cases have failed to give a positive result with the complement fixation test.

Results in tertiary stage.—Of 406 patients presenting symptoms of the tertiary stage of syphilis, 355, or 87.4 per cent, gave a positive reaction. The percentage of positive results in this stage obtained by different observers has varied greatly, owing largely to the effect of previous treatment upon the reaction. Many of our cases had received mercurial treatment, but generally such treatment had been given intermittently and probably did not greatly interfere with the reaction.

Results in the latent stage.—In this class of cases are included all those in which no active symptoms of the disease were present at the time of making the test. No distinction has been made between early and late latent cases. Almost all of these cases had received more or less specific treatment and the majority were tested in order to determine whether the disease had been cured. Of this class of cases 739 were tested, with a positive result in 487, or 65.8 per cent. In most of these cases the only evidence of the disease was glandular enlargement, and in many of them even this symptom was absent. The great value of the Wassermann test in the diagnosis of syphilis is well shown in the high percentage of positive results in this class of cases.

Diseases other than syphilis.—Of the total 4,631 tests made on individuals in this laboratory, 1,269 were in patients suffering from diseases other than syphilis. Of this number 9 gave a positive result, or 0.8 of 1 per cent. Of the positive cases 3 were in patients suffering from tertian malarial fever, the blood being tested during the febrile stage; in all, the blood became negative after the subsidence of the fever. In one case the diagnosis was undetermined fever and the blood became negative during convalescence. In this case the exact nature of the disease could not be determined. In three cases the diagnosis was tuberculosis, but all recovered under specific treatment. In two of these cases a history of syphilitic infection was afterward obtained, while in the other such an infection could not be excluded. In two cases, diagnosed pityriasis rosea, a plus reaction was obtained, which disappeared in the subsidence of the eruption. Other cases of this disease have been tested with a negative result, but the occurrence of the reaction in this disease should be noted and further work done upon the subject.

Normal individuals.—The blood of 156 individuals in good health and in whom syphilitic infection could be excluded was tested and a negative result obtained in every instance.

The test as a control of treatment.—In the vast majority of the 3,880 reexaminations the test was repeated for the purpose of controlling treatment either with salvarsan or with mercurials. The results have demonstrated the great value of the test as an index of the efficiency of treatment, and we have been able to trace the gradual disappearance of the reaction in treated cases and its reappearance in cases which required further treatment. The use of the test in this manner has made possible the intelligent administration of both salvarsan and mercury, and every patient suffering from syphilis should have the treatment controlled by Wassermann tests made at intervals of at least two months. Only in this way can justice be done the patient and the specific treatment of syphilis be controlled in an adequate and scientific manner.

The specificity of the test.—As a result of experience it is believed that the Wassermann test may be considered specific for syphilis if such conditions as leprosy, malarial fever, scarlet fever, and frambesia can be excluded. In all of these diseases a certain proportion of patients have given a positive result, but fortunately they can generally be excluded by the difference in the clinical history and symptoms. A few other conditions have also given positive results in isolated instances, as carcinoma, tuberculosis, pityriasis rosea, and sepsis, but such cases are so infinitesimal in number that they do not vitiate the practical value of the test. It is certain that a large percentage of positive results in nonsyphilitic cases is proof of imperfect technique, and such reports must be viewed with suspicion.

If the diseases in which the complement fixation test has occasionally been found positive can be excluded, a double-plus or plus reaction is sufficient to enable one to diagnose the presence of lues. It seems certain that, under such conditions, the test is absolutely specific whether symptoms of the disease are present or not, and whether there is, or is not, a history of infection. In those cases in which, after the appearance of a suspicious lesion, the negative reaction becomes positive, a diagnosis of lues can be made without hesitation. On the other hand, a diagnosis of syphilis should never be made upon a plus-minus reaction alone.

The value of a negative reaction is not as great as that of a positive one. A considerable proportion of cases of lues do not give a positive reaction, even though symptoms are present, and for this reason the disease can not be excluded on the strength of a negative result. The history of the case, the symptoms present, and the amount of previous specific treatment must all be carefully considered.

Practical value of the test.—After nearly three years experience with the Wassermann test in the laboratory at the Army Medical School, it has been demonstrated that it is an indispensable aid in the diagnosis and treatment of syphilis. In the military service the test has proven of the greatest value in the diagnosis of obscure and latent infections and in controlling treatment with salvarsan and mercurials. It has also been of value in preventing the enlistment of syphilitic individuals and in clearing up the diagnosis in cases involving retirement for physical disability.

X-RAY WORK AT THE ARMY MEDICAL SCHOOL.

The X-ray work during the past year consisted of instruction in electricity and study of electrical apparatus, followed by a practical course in taking, developing, and interpreting radiographs. The school is equipped with a high potential transformer, a coil apparatus, and a static machine. Students are given sufficient practical work in taking radiographs with all these forms of apparatus to enable them to do good work with whatever equipment is found installed at the post to which they are assigned.

Since the close of the school year the sixth floor of the school building has been rearranged, a new dark room built, and several new pieces of apparatus installed, which will enable the work for the coming year to be carried on more conveniently and thoroughly than hitherto.

LETTERMAN GENERAL HOSPITAL.

The number of tissue examinations made were more than three times this year what they were the previous year, and in nearly all cases definite and satisfactory results were obtained. The commanding officer says that it is gratifying to state that in this sphere of pathology, in which medical officers usually display less interest and knowledge than any other, commendable progress is being made.

The number of vaccines prepared in the laboratory were also more than trebled during the year. In this field few brilliant results were obtained; but many skin infections and some chronic suppurative otitis medias yielded to vaccine treatment.

The Wassermann reactions done have increased from 345 last year to 2,607 this year. In order to carry out this important work, the officer in direct charge of the laboratory has to give up two days of every week to these tests alone; nevertheless the results obtained have certainly justified the time and labor spent.

The happy and unusual result attained through the knowledge of a positive Wassermann test, in a recent case, still under observation is sufficient excuse for giving a brief account of the following case:

An officer who was under treatment in this hospital in 1909 for gastritis with hypoacidity was transferred here from the Philippines in November of this year, with the same diagnosis. Prior to his admission to this hospital, on the first occasion, he had consulted one of the most prominent internists of the country, who gave a similar diagnosis. On account of localized tenderness, and pain after eating, and in spite of almost total absence of acid, the diagnosis was changed to ulcer and upon obtaining a positive Wassermann reaction the patient was given mercurial inunctions. In a short time all tenderness disappeared, and he could eat without pain, and now all gastric symptoms have been absent for a month. Except for a temporary set back, due to a sharp attack of influenza, he is much better in every way.

Record of examinations made in pathological, bacteriological, and chemical laboratories during the year 1911.

Blood examinations	996	Water analyses, chemical	18
Urine examinations	3,663	Milk analyses	26
Sputum examinations	1,764	Malt extract for alcohol content	11
Feces examinations	696	Animal injections	277
Pus examinations	807	Autopsies	29
Culture examinations	583	Miscellaneous	12
Skin scrapings	47	Tuberculin tests given	52
Tissue	339	Examinations of suspected typhoid specimens:	
Fluids by aspiration	18	Widal reactions	84
Sera for lues (Wassermann)	2,607	Blood culture	77
Sera for treponema	115	Feces	73
Stomach contents	62	Urine	56
Vaccines prepared	74		
Water analyses, bacteriological	218		

FORT LEAVENWORTH.

The following is from the report of the surgeon:

In addition to the clinical laboratory examinations of specimens from the wards of the Post Hospital, the post water supply has been examined bacteriologically at 10-day intervals, the sewage effluent has been tested weekly as to its putrescibility, and various examinations have been made of specimens submitted from other posts.

In addition to this work examinations of feces, urine, and blood from suspected cases of typhoid fever, originating at posts in this vicinity, have been conducted at this laboratory during the year, as heretofore.

FOOD ANALYSIS.

During the past two months (Jan. 1, 1912) this department of the sanitary work has steadily increased. The post milk supply, from four dairies, has been examined regularly and since the dealers have learned that their products are subject to frequent examination the quality of the milk has become materially better. The laboratory has cooperated with the commissary in examining samples of flour, vinegar, etc., and this work is of economic importance as contracts have been awarded upon the laboratory findings.

Summary of laboratory examinations.

Clinical laboratory examinations:	
Blood examinations—	
Leucocyte counts	27
Differential leucocyte counts	8
For malaria	53
Hemoglobin estimations	5
Urinalyses	356
Sputum examinations	66
Feces examinations—	
For parasites or ova	24
For occult blood	2
Cultures—	
Throat	90
Miscellaneous	5
Smears—	
Urethral	71
Throat	15
Miscellaneous	3
Examinations of mothers' milk	12
Total	737
Typhoid examinations:	
Cases of typhoid fever	8
Suspected typhoid carriers	0
Agglutination tests (Widal)	22
Positive	7
Negative	15
Typhoid examinations—Continued.	
Blood cultures	1
Positive	1
Negative	0
Cultures from clot	3
Positive	0
Negative	3
Feces	33
Positive	6
Negative	27
Urine	32
Positive	5
Negative	27
Total examinations	91
Sanitary laboratory examinations:	
Water examinations—	
Bacteriological	39
Chemical	4
Food analyses—	
Milk	32
Flour	10
Vinegar	5
Beverages, percentage of alcohol	4

MEDICAL DEPARTMENT.

The Medical Department consists of the Medical Corps, the Medical Reserve Corps, the Dental Corps, the Army Nurse Corps, and the Hospital Corps.

The following statement shows the strength of the personnel, commissioned, enlisted and employed, by contract or otherwise, of the Medical Department on June 30, 1912:

Medical officers	414
Medical reserve officers on active duty	115
Contract surgeons	11
Dental surgeons, commissioned	28
Acting dental surgeons, under contract	10
Army Nurse Corps	125
Hospital Corps	3,453
Civil employees	214
Total	4,370

MEDICAL CORPS.

The Medical Corps is composed of the commissioned medical officers of the Regular Army.

Authorized strength June 30, 1912	445
In service June 30, 1911	381
Appointed during the year	39
Total	420
Losses during year	6
In service June 30, 1912	414

On October 2, 1911, 47 candidates who had passed the preliminary examination for appointment in the Medical Corps reported at Washington to take the course of instruction at the Army Medical School. Thirty-nine successfully completed the course of instruction at the school and were graduated May 31, 1912; 37 of the graduates were recommended for appointment in the Medical Corps of the Army, but before receiving commission 1 of them resigned. Owing to illness, one of the student officers was not able to take the examination and graduate with the rest of his class, but was given a special examination later and has been recommended for commission in the Medical Corps.

Losses during the fiscal year.

	Brigadier generals.	Colonels.	Lieutenant colonels.	Majors.	Captains.	First lieutenants.	Total.
Retired		1		1			2
Resigned					2		2
Discharged						1	1
Died		1					1
Aggregate		2		1	2	1	6

The death was Col. Louis W. Crampton, April 12, 1912.

PROMOTIONS DURING THE FISCAL YEAR.

The following promotions were made: Two lieutenant colonels to be colonels; 2 majors to be lieutenant colonels; 3 captains to be majors; 27 lieutenants to be captains.

The department has continued to hold preliminary examinations for appointment in the corps the second Monday in each month at San Francisco, Fort Sheridan, and Washington, D. C. During the fiscal year 41 applicants passed the preliminary examinations. Of this number 26 attended the session of the Army Medical School which ended May 31, 1912, leaving 14 who will attend the next session of the school. A preliminary examination will be held on July 15, 1912, at various Army posts throughout the United States and at Ancon, Panama, to which 51 applicants have been invited. The last examination before the opening of the school will be held on Tuesday, September 3, 1912, and 22 applicants have already signified their intention of taking the examination at that time.

MEDICAL RESERVE CORPS.

On roster June 30, 1911		922
Appointed during the year		236
		1,158
Losses during year:		
Resigned	11	
Discharged	2	
Died	3	
Commissions vacated	[1] 37	
		53
On roster June 30, 1912		1,105

Of the 1,105 on roster June 30, 1912, 115 were on active duty and 990 on the inactive list.

On active duty June 30, 1911		138
Ordered to active duty during the year		39
		177
Relieved from active duty	18	
Commissions vacated	37	
Honorably discharged	2	
Resigned	4	
Died	1	
		62
On active duty June 30, 1912		115

The appointment of qualified candidates to vacancies in the junior grade in the Medical Corps has rendered it necessary to correspondingly reduce the number of officers of the Medical Reserve Corps on active service. In addition to the reduction shown in the above table, 20 officers of this corps have been notified that they will be returned to the inactive list October 1, 1912.

The advantages of having a reserve of officers who have been trained by active service with troops is obvious. In order that the number of men who have received such training may be as large as possible, it is the policy of this office to relieve from active service as rapidly as it can be done officers who have acquired experience and to replace them by others from the inactive list, these in turn being replaced by still others after a period of two years' active service.

[1] Student officers at Army Medical School. The commissions were vacated by appointment in the Medical Corps.

CONTRACT SURGEONS.

In service, June 30, 1911	13
Contracts made during the year	5
Total	18
Contracts annulled during the year	7
Contracts in force, June 30, 1912	11

Of these contracts, 1 is temporary and 10 are on duty at arsenals, headquarters of military departments, and remount depots at pay ranging from $75 to $125 per month.

DENTAL CORPS.

Number of dental surgeons in service, June 30, 1911	29
Resigned during the year	1
Number of dental surgeons in service, June 30, 1912	28
Acting dental surgeons in service, June 30, 1911	1
Appointed during the year	10
Total	11
Contracts annulled during the year	1
Acting dental surgeons in service, June 30, 1912	10

ARMY NURSE CORPS.

The authorized strength of the Nurse Corps is 125, and all vacancies which occur are promptly filled.

Nurses are assigned to the following stations: Letterman General Hospital, San Francisco, Cal.; Army General Hospital, Fort Bayard, N. Mex.; Army and Navy General Hospital, Hot Springs, Ark.; Walter Reed General Hospital, Takoma Park, D. C.; attending surgeon's office, Washington, D. C.; Fort Shafter, Honolulu, Hawaii; Division Hospital, Manila, P. I.; Fort William McKinley, Rizal, P. I.; Pettit Barracks, Zamboanga, Mindanao, P. I.

Nurses were assigned to the hospital at Fort William McKinley, P. I., in July, 1911, and were also assigned to Fort Shafter, Honolulu, Hawaii, in April, 1912. Requests for additional nurses have been received from the Army and Navy General Hospital, Hot Springs, Ark., and also from the hospital at Fort Shafter, Honolulu, Hawaii. A request for nurses to be assigned to the hospital at Fort Leavenworth, Kans., was received, which, with the present number in the corps, could not be granted.

An addition to the nurses quarters of the Walter Reed General Hospital, Takoma Park, D. C., is in process of building, and will add several bedrooms and a much larger kitchen. The general health of the nurses throughout the year has been excellent.

During the fiscal year 1911–12 there have been 586 applications for admission to the Army Nurse Corps. During the same period there have been 33 discharges, 58 appointments, and 3 reappointments. A tour of inspection was made by the superintendent of the Army Nurse Corps in June, 1912, which included all the hospitals of the United States where members of the Nurse Corps are stationed.

The enrolled nurses of the American Red Cross Nursing Service now constitute the reserve of the Army Nurse Corps, and in time of war or other emergency may with their own consent be assigned to active duty in the military establishment. Through the work done by the committees of the Red Cross and the American Nurses' Association this reserve has been increased from 2,000 to 3,000 during the past year. Twelve nurses from the Red Cross reserve were called into active service by the National Red Cross and assigned to duty at refuge camps in the flooded districts of Louisiana and Mississippi during the overflow of the Mississippi River in May and June. The promptness with which these nurses reported and the satisfactory character of their services demonstrated the value of the reserves in time of emergency.

HOSPITAL CORPS.

The authorized strength of the Hospital Corps is as follows:

Sergeants first class	300
Sergeants	350
Corporals	50
Privates first class and privates	2,800
Total	3,500
Strength June 30, 1911:	
Sergeants first class	285
Sergeants	333
Corporals	40
Acting cooks	195
Privates first class	1,270
Privates	1,330
Total	3,453
Gain July 1, 1911, to June 30, 1912:	
By enlistment and reenlistment	877
By transfer from the line	826
By return from desertion	100
Loss during same period:	
By discharge expiration term of service	1,133
By discharge by order	232
By discharge sentence general court-martial	104
By discharge certificates disability	50
By transfer to the line	41
By retirement	21
By death due to disease	12
By death due to accident	4
By suicide	1
Dropped	4
Deserted	158
Leaving in service June 30, 1912:	
Sergeants first class	262
Sergeants	341
Corporals	39
Acting cooks	200
Privates first class and privates	2,654
Total	3,496

About 13 per cent of the total loss to the corps was by discharge by purchase to accept positions in civil life, and as a number of these men so discharged again enlisted for the Hospital Corps at stations

other than those from which they were discharged. it is evident that the privilege of discharge by purchase is, so far as members of the Hospital Corps are concerned. being abused.

An examination of sergeants for promotion to the grade of sergeant first class was held in the United States and in the Philippines division May 6 to 11, 1912. Of the 121 sergeants in the United States who made application for admission to the class, 118 were admitted, and of this number 75 were recommended by the local examining board for advancement. In the Philippines division 41 applications for admission were received and 38 were granted authority to take the examination; 32 of these were examined and 24 were recommended by the local examining boards for promotion. All papers connected with the examination are now being graded in this office, and as soon as results are known recommendation will be made for the appointment of a sufficient number of successful candidates to fill the vacancies in the grade of sergeant first class.

Examinations were held in all the divisions and at independent stations during the year for promotion to the grade of sergeant, and 115 approved candidates were appointed to that grade. As the number of successful candidates far exceeded the number of vacancies in the grade, their names were placed on the eligible list according to merit, and recommendation will be made from time to time for their appointment as vacancies occur.

Twenty-three privates, first class, or privates were appointed to the grade of corporal, and nine of this grade were appointed to the grade of sergeant. The vacancies in the grade of private, first class, and private were filled by transfer from the line of unassigned recruits and by acceptances at recruiting stations and at posts of specially desirable men for enlistment. The majority of the men so transferred or enlisted were sent to field hospitals for a course of instruction and upon completion of the course were assigned to posts in the division or to independent stations.

Attention is invited to the fact that the present authorized strength of the Hospital Corps (3,500) is inadequate for the needs of the service and that the department is unable to furnish the number of men prescribed by Army Regulations (less 8 per cent directed by the Secretary of War in October, 1909) for posts and independent stations.

During the summer of 1909, and a number of times since, this office has called the attention of the Chief of Staff to the necessity for an increase in the Hospital Corps if the efficiency of the service is to be maintained. The law organizing the Hospital Corps places specifically upon the Secretary of War the responsibility of providing a number of Hospital Corps men sufficient for the sanitary service, and provides that "they shall not be computed as a part of the strength of the Army." The intention of Congress is thus plain that the Army shall have a sufficient number of enlisted sanitary personnel to provide an efficient service, which is clearly not the case at present. When the present strength of 3,500 men was allowed for the Hospital Corps, the strength of the Army was less than 76,000. Its present authorized strength, not including the Filipino Scouts, is about 86,000, and the strength of the Hospital Corps to correspond to it would be 4,200, or 200 more than the increase asked for at present. It will be observed that no legislation by Congress is necessary to carry out this recommendation. The reasons for this recommendation were fully stated

in the memorandum to the Chief of Staff from this office, dated July 27, 1911.

This office last year, in a memorandum to the Chief of Staff dated July 27, referring to the report of the Chief of Staff to the Secretary of War, pointed out that the pay of the Hospital Corps in the pay bill of 1908 was not increased proportionately to that of other enlisted men, so that an injustice was done the Hospital Corps which has made it difficult to obtain a good class of men and retain the services of noncommissioned officers. When the Hospital Corps was organized in 1887, it was recognized that its members would be required to do work that was not attractive to enlisted men and which would require special qualifications. To secure suitable men to perform these unattractive duties, noncommissioned officers of the Hospital Corps were given pay considerably in excess of most noncommissioned officers of the line and at a later date the pay of the privates was likewise proportionately increased. This principle was lost sight of in the legislation of 1898 and its recognition in future legislation is necessary to secure the efficiency of the service.

The following grades and rates of pay are recommended:

Sergeants major (new grade), 30, at $75 per month, with the increased pay for service as now authorized for sergeants, first class.

Sergeants, first class, 300, pay to be increased from $50 to $65 per month.

Sergeants, pay to be increased from $30 to $36 per month.

Corporals, $24 per month (no increase).

Privates, first class, pay to be increased from $18 to $21 per month.

Privates, $16 per month (no increase).

A bill to effect these increases (S. 5725 and H. R. 22263, 62d Cong., 2d sess.), prepared and introduced without any prompting on the part of this office, is now before Congress, and it is believed that if the support of the War Department is given to such a measure it would be passed.

Sergt. Harry E. Pye was granted a certificate of merit November 1, 1911, for gallant conduct in assisting, at the risk of his own life, in saving a native from drowning, on the capsizing of a lorcha. This occurred in the narrows between the island of Samal and the mainland of Mindanao, P. I., March 1, 1911.

Field Hospital and Ambulance Company No. 1, left the maneuver division, San Antonio, Tex., July 17, 1911, en route to Fort D. A. Russell, Wyo., arriving at that place July 21, 1911. Classes were immediately formed for instruction and the regular course resumed.

On October 10, 1911, Ambulance Company No. 1 was constituted a separate organization in compliance with instructions The Adjutant General's Office, War Department, October 5, 1911, and 5 noncommissioned officers and 47 privates first class and privates were transferred from Field Hospital and Ambulance Company No. 1 to this organization. The remaining personnel was designated as Field Hospital No. 1.

On September 16, 1911, Ambulance Company No. 2 was constituted a separate organization by the transfer from Field Hospital and Ambulance Company No. 2 of 5 noncommissioned officers and 17 privates, first class, and privates. The remaining personnel was designated Field Hospital No. 2 and continued the records of the previous organization under the new title. This was the final step in the dissolution of Company B, Hospital Corps, and the organization of its

personnel into two separate units in accordance with indorsement, War Department, April 17, 1911, and letter The Adjutant General's Office, June 21, 1911.

On February 1, 1912, Field Hospital No. 2 and Ambulance Company No. 2 were transferred from the jurisdiction of the Letterman General Hospital to that of the Presidio of San Francisco, Cal., and it is believed that the closer relation of the mobile troops thus obtained will prove of greater efficiency.

December 16 to 19, 1911, Field Hospital No. 2 and Ambulance Company No. 2 went into camp on the Presidio Reservation for field instruction, and June 17 to 19, 1912, they were in camp at Fort Winfield Scott for same duty.

The commanding officer of Field Hospital No. 2, in his report of operations of his organization for fiscal year ending June 30, 1912, has the following to say of the dissolution of Company B and the formation of Field Hospital No. 2 and Ambulance Company No. 2:

The fiscal year of 1911–12 has witnessed a marked advance in the adoption of the means available for the sanitary service in war to the requirements of the administrative unit of our field forces—the division.

In previous years the companies of instruction, Hospital Corps, have been organized as field hospital and ambulance company from time to time as the occasion demanded for the purpose of supplying sanitary units for mobile troops. This year the organization of the units for field service with troops has been maintained, and these units while in garrison have performed the functions of recruit depots for the drilling and instruction of recruits for the Hospital Corps, which has heretofore been the work of companies of instruction. The wisdom of this has been abundantly demonstrated so far as Field Hospital No. 2 and Ambulance Company No. 2 is concerned, and it is evident that much greater efficiency is obtainable among officers and men who actually belong to an organization which may be called upon at any time for field service than is possible with the same officers and men who realize only that they may be formed into sanitary units, should occasion demand.

Field Hospital No. 3 and Ambulance Company No. 3 left maneuver division, San Antonio, Tex., July 17, 1911, en route to the Walter Reed General Hospital, Takoma Park, D. C., arriving at that place July 21, 1911. Field Hospital No. 3 proceeded to Camp Perry, Ohio, August 11, 1911, for the purpose of conducting a field hospital during the national rifle match at that camp, returning to the Walter Reed General Hospital September 1, 1911.

On May 4, 1912, Field Hospital No. 3, established a field hospital at the International Red Cross Conference, Washington, D. C., returning to Walter Reed General Hospital, May 17, 1912.

Ambulance Company No. 3 left the Walter Reed General Hospital, Takoma Park, D. C., September 6, 1911, en route to Fort Leavenworth, Kans., for station, arriving at that place September 9, 1911. The entire company participated in field problems, during the fall and spring seasons, of the field service school for medical officers at Fort Leavenworth, Kans.

ARMY MEDICAL SCHOOL.

[Commandant, Col. Louis A. La Garde, Medical Corps, United States Army; secretary, Maj. C. R. Darnall Medical Corps, United States Army.]

The sixteenth session of the Army Medical School began October 1, 1911, and closed May 31, 1912. The number of accepted candidates appointed in the Medical Reserve Corps and admitted to the school was 47. Thirty-nine of these completed the course and qualified on final examinations. Six failed to pass the mid-term examination and were relieved from duty at the school by orders from the War Department; one resigned during the school term and one failed to pass the final examination at the end of the school term.

No officers of the Organized Militia were given permission to attend the course during this session because the large number of candidates for admission to the Medical Corps taxed the capacity of the school.

The course of instruction has varied but little from that of last year. The following table shows the subjects taught, the number of hours devoted to each, names of the instructors, and the value of the several subjects:

No.	Subject.	Hours of instruction.	Instructor.	Maximum.	Minimum.
1	Medical Department administration, duties of medical officers, and customs of the service.	104	Maj. Chas. R. Reynolds.....	1,000	800
2	Clinical microscopy and bacteriology.....	291	Maj. F. F. Russell, Capt. C. F. Craig, Capt. H. J. Nichols.	900	720
3	Military hygiene.....	24	Maj. P. C. Fauntleroy.....	800	640
4	Military surgery.....	18	Col. L. A. La Garde.	800	640
5	Military and tropical medicine.....	20	Lieut. Col. W. D. McCaw...	800	640
6	Sanitary chemistry.....	147	Maj. C. R. Darnall.....	600	480
7	Hospital Corps drill.....	70	Capt. W. A. Wickline.....	500	400
8	Operative surgery.....	27	Capt. Wm. A. Duncan.....	400	320
9	Ophthalmology and optometry.....	64	Maj. P. S. Halloran, Capt. Wm. T. Davis.	400	320
10	Radiography.....	28	First Lieut. Henry Beeuwkes.	300	240

In addition to the above the following instruction was given: a series of eight lectures on military law by Lieut. Col. J. B. Porter, Judge Advocate General's Department; a series of two lectures on sanitary work in Cuba by Lieut. Col. J. R. Kean, medical department; a series of lectures and clinical demonstrations in psychiatrics at the Government Hospital for the Insane by Dr. J. S. White and Capt. L. L. Smith, Medical Corps; twenty hours in equitation at Fort Myer, Va. The final examination ended May 17, 1912.

The marks obtained by the students in the several subjects and the final aggregate are shown in accompanying proficiency list. The closing exercises were held in the Continental Memorial Hall on May 31, 1912. Lieut. Samuel L. Lloyd, M. R. C. (inactive list), New York City, delivered the address, his subject being "The relation of the Army surgeon to the community." The diplomas were delivered by Gen. George H. Torney, Surgeon General. The Hoff memorial medal was awarded to First Lieut. William B. Meister, Medical Reserve Corps, and presented to him by Col. John van R. Hoff, Medical Corps, retired.

The lectures in military surgery are now better illustrated than ever before by the aid of charts suspended from swinging rods fixed in the wall and by the aid of a very good collection of lantern slides and skiagrams to illustrate the effects of bullets of varying calibers and velocities on dead and living tissues.

Following the usual course in bacteriology, the spirochætæ were taken up as transition forms between the bacteria and protozoa. The spirochætæ of the mouth and those of relapsing fever were considered briefly, most of the time, however, being devoted to those of syphilis and yaws on account of the importance of venereal and tropical diseases in the military service. Fresh material was obtained from infected rabbits and specific diagnosis was demonstrated by the dark-field microscope, by the india-ink method, and by Giemsa's stain. The presence of the organisms in the lesions of both diseases

was shown by the silver stain. Noguchi's culture methods were also demonstrated. The principal lesions of syphilis were illustrated by specimens, including precolumbian bones, from the Army Medical Museum. Treatment with mercury and salvarsan was discussed, and an intravenous injection of salvarsan was given to a soldier to illustrate the technique of administration.

Protozoology, on account of its growing importance in the study of tropical disease, has received much attention, and more time has been devoted to the study of the protozoa than in any previous course at the school. Commencing with the amœba, a thorough study has been made of the malarial plasmodia, the trypanosomes, and the Leishmania, as well as some of the protozoa of the intestine of small animals. Entamœba coli, Entamœba hystolitica, Entamœba tetragena, and the free-living culture amœba were studied in stained preparations, and the cultural amœba in cultures prepared by the students. The important points in the differentiation of the amœba of man and the free-living forms were carefully considered, and every student required to make drawings of the different species from specimens submitted.

The course upon the malarial plasmodia included the study of stained preparations of the various species and lectures upon the morphology and biology of the parasites and their relation to the different types of malarial fever. The students were required to make Wright's stain and to stain preparations of the blood containing the parasites, as well as to stain malarial tissues.

The trypanosomes were studied by selecting a typical species (*T. lewisi*) and requiring the students to inoculate animals and to stain and study specimens of blood obtained from the animals at varying intervals after inoculation. The morphology of this species was thus studied at the different stages in its life cycle and the fact impressed that the trypanosomes vary greatly in this respect at different times during their development in their host. All of the most important trypanosomes, including that of sleeping sickness, was demonstrated to the class and cultures of *T. lewisi* were also studied.

The subject of serology, which has assumed so much importance within the past few years, has been considered, especially in its application to the diagnosis of varying infections. During the course in bacteriology the principles of immunity were thoroughly considered and experimental work undertaken to illustrate its various practical applications in diagnosis. Thus the various agglutination reactions and the methods of estimating the opsonic index were studied. The Wassermann test has been performed by the individual student and the methods of preparing and standardizing the various reagents required practically demonstrated.

The school requires a large amount of material for purposes of demonstration, and while in the past the graduates have contributed very valuable aid in this direction it is felt that a more general interest in this matter would be of the greatest benefit to the school. It is therefore hoped that the graduates of the school will continue to send specimens which can be used in the instruction of the classes, such as intestinal parasites, blood smears containing malarial plasmodia or other parasites, and tissues obtained at operation or at the autopsy table.

An entire change was made in teaching ophthalmology looking more to the clinical side of the subject. The aim was to give a

practical course, taking up only that part of ophthalmology and optometry with which the medical officer will have to deal in his routine work at posts.

During the first two months lessons were assigned and the class quizzed on general optical principles, optical considerations of the eye, errors of refraction, anomalies of accommodation, ocular therapeutics, and the uses of the ophthalmoscope and retinoscope.

Printed notes were distributed and practical exercises given in subjective refraction, presbyopia, duction tests, prescription writing, the fitting of spectacle frames, determining the character of lenses and neutralizing them, testing visual fields and a method for making a systematic examination of the eye.

The work in the dark room was at first limited to the study of the normal fundus of the schematic eye by means of the ophthalmoscope, and retinoscopy was practiced on the schematic eye. When the student officers became familiar with the retinoscope and ophthalmoscope, patients under the influence of a cycloplegic were assigned to them for examination and refraction. The results they obtained were checked up and inaccuracies corrected. Patients were secured from the Walter Reed General Hospital, the Soldier's Home, and an eye clinic in the city. The final examination consisted in a practical test in which the students were required to demonstrate their ability to diagnose diseases, refract, and prescribe for cases of ametropia.

Relative proficiency of the student officers at the Army Medical School, session 1911–12.

	Final rating.	Aggregate (maximum, 7,000; minimum, 5,600).	Remarks.
First lieutenants, Medical Reserve Corps:			
Carroll R. Baker	27	5,929	
James E. Baylis	28	5,925	
Harry H. Blodgett	3	6,317	Proficient with honor.
Morris H. Boerner	11	6,089	
Thomas W. Burnett	34	5,844	
Charles R. Castlen	30	5,893	
Phillip B. Connolly	7	6,211	
Michael A. Dailey	22	6,000	
Chester R. Haig	12	6,064	
William E. Hall	23	5,986	
Johnson F. Hammond	24	5,961	
Robert M. Hardaway	38	5,786	
Thomas E. Harwood, jr	15	6,056	
Howard L. Hull	14	6,057	
John G. Ingold	39	5,761	
Frederick C. A. Kellam	32	5,889	
Kerwin W. Kinard	21	6,003	
Douglas W. McEnery	26	5,943	
Harry R. McKellar	6	6,240	
Hew B. McMurdo	35	5,837	
Shelley U. Marietta	9	6,178	
William B. Meister	1	6,467	Medalist.
Alvin C. Miller	20	6,004	
John W. Mehan	33	5,871	
Neopold Mitchell	19	6,015	
Luther R. Poust	18	6,030	
Omar H. Quade	2	6,361	Proficient with honor.
Guy L. Qualls	13	6,063	
Thomas E. Scott	16	6,048	
John W. Sherwood	25	5,956	
Robert Skelton	8	6,198	
Leeson O. Tarleton	5	6,270	
John H. Trinder	17	6,046	
Samuel J. Turnbull	31	5,890	
Alfred P. Upshur	36	5,835	
Harry H. Van Kirk	10	6,105	
Charles M. Walson	37	5,834	
Adnor G. Wilde	29	5,906	
Neal M. Wood	4	6,310	Do.

ORGANIZED MILITIA.

The following is an extract from a report furnished this office by Capt. Henry D. Thomason, Medical Corps, United States Army, who was, in July, 1910, detailed for duty in the office of the Chief, Division of Militia Affairs, War Department:

* * * I reported for duty in the office of the Chief, Division of Militia Affairs, and was placed in charge of matters pertaining to the organization, equipment, and instruction of the sanitary personnel of the Organized Militia of the United States. Previous to this time the Chief, Division of Militia Affairs, had but one assistant, a line officer. It had been found that problems involving sanitary service and medico-military affairs in the Organized Militia were assuming more and more importance. Such of these as could not be intelligently handled by the line officer assistant were referred to the office of the Surgeon General of the Army, but it soon became apparent that the volume of work pertaining to sanitary troops in the Organized Militia had increased to such proportions that, in justice to both the War Department and the Organized Militia, it seemed necessary to detail a medical officer of the Army who could devote his entire time to this branch of the service.

The prime object was to prepare, train, and equip the sanitary troops of the Organized Militia of the United States for field service, the object in view being a possible call into the service of the Federal Government as provided by law, and by this training and preparation enable them to take their place with efficiency with the first line of defense of the country. It is for the purpose of this field efficiency that the Organized Militia of each State and Territory, proportionately to its congressional representation, is annually allotted from Federal funds under Section 1661, Revised Statutes, $2,000,000 for arms, equipments, camp purposes, and promotion of rifle practice, and under Section 13 of the Militia law, proportionate to the enlisted strength of each State, Territory, and District of Columbia, is an additional allotment of $2,000,000 for supplies and ammunition, each of these allotments independent of special appropriations made bi-annually for encampments and maneuvers.

In order to meet the first requirement in efficiency for the sanitary troops, it was recognized that an adequate personnel in numbers was essential. Most of the States were not only lacking in strength of personnel, but in organization, equipment, and instruction. General Orders, No. 35, War Department, 1910, provided for an organization designated as the "First Field Army." This consisted of Regulars and Organized Militia stationed within the limits of the State of New York and the New England States. This order contemplated a field army of three divisions.

It was found that, had this field army been mobilized (as was at one time contemplated for purposes of instruction), there would have been a deficiency of all auxiliary troops, but the most glaring shortage would have been in the sanitary service. In the year 1910, instead of having, as provided in Field Service Regulations, 12 ambulance companies and 12 field hospitals to meet the requirements of this Field Army, the records of the Division of Militia Affairs showed that there would have been available for this concentration only one field hospital (New York) and one ambulance company (called an ambulance company section, of Massachusetts). To show the progress that has been made, if this Field Army were concentrated at the present writing, there would be available in the Organized Militia within this territorial boundary, five ambulance companies and five field hospitals. If other field armies had been prescribed covering other territorial districts at the time General Orders, No. 35, was promulgated, this showing of the sanitary service would have been materially less, for outside of the territorial limits of the First Field Army, but two ambulance companies and one field hospital existed in the Organized Militia. At the present time the Organized Militia could provide outside the territorial limits of the First Field Army, 11 ambulance companies and 15 field hospitals.

The status of the sanitary service of the Organized Militia at the beginning of the fiscal year 1910-11 was at a low standard so far as organization was concerned; also its equipment (barring exceptional instances) was likewise very deficient, and systematic instruction had hardly begun. It received its initial impetus at the camps of instruction for medical officers conducted in 1909 at Antietam and Sparta. At the joint maneuvers of 1910, when medical officers of the Army were liberally supplied as inspector-instructors to the Organized Militia and the sanitary units of the Army were sent out as object lessons to demonstrate their important function and duties in camp, combat, and on the march, a general awakening and improvement in the sanitary service throughout the Organized Militia has been apparent.

As a result of the frequent instruction imparted to medical officers and enlisted men of the Hospital Corps belonging to the Organized Militia by the Medical Department

of the Army, in camp, in armories, special and correspondence schools, there is now a nucleus well posted in camp sanitation, tactical problems pertaining to the medical service in war, knowledge of administration, and all other functions devolving upon the military sanitary service. All this will prove a valuable asset to the Government in the event the Organized Militia is called into the Federal service.

The Field Service School for medical officers at Fort Leavenworth, Kans., authorized by General Orders, No. 132, War Department, 1910, conducted its first course beginning April 1 and terminating May 11, 1912. Five of the seven medical officers of the Organized Militia authorized to attend completed the course and received their certificates of proficiency, which are on record in the War Department. It is hoped that authorization will be given for the attendance of a larger number of medical officers of the Organized Militia at the next annual session of the school. Within the last fiscal year there have also been received a number of applications by medical officers of the Organized Militia to attend the course at the Army Medical School in Washington, D. C. Owing to the large classes in this school, composed of candidates for the Medical Corps of the Army, these applications have had to be disapproved, but it is hoped that in the very near future the opportunities of this school will be made available for medical officers of the Organized Militia.

As the sanitary personnel and the sanitary units in the Organized Militia have so materially increased within the last two years, and prospects are favorable for a continued growth, it is believed the time has arrived when the assignment of a few permanent inspector-instructors from the Medical Corps of the Army, and sergeant-instructors from the noncommissioned officers of the Hospital Corps, will be of distinct advantage on lines now provided for the Calvalry and Field Artillery of the Organized Militia. It is also believed that the resulting increased efficiency and the returns to the Federal Government would more than compensate the cost. Legislative enactment of Federal pay for the Organized Militia will, when it becomes operative, bring this important body for national defense into still closer relations with the regular establishment, and the responsibility rests with the Medical Department of the Army to exert every effort to render the sanitary troops of the Organized Militia an efficient and dependable organization.

The following table shows the increase in sanitary personnel and units in the Organized Militia from June 30, 1910, to June 30, 1912:

State.	Medical officers.		Enlisted men.		Field hospitals.		Ambulance companies.		Hospital Corps detachments.	
	1910	1912	1910	1912	1910	1912	1910	1912	1910	1912
Alabama	7	11	16	35	.....	.....	.....	.....	1	3
Arizona	3	4	1	1	.....	.....	.....	.....	1	.....
Arkansas	15	17	.....	21	.....	.....	.....	.....	.....	.....
California	14	18	43	55	.....	.....	.....	.....	4	6
Colorado	8	11	24	31	.....	.....	.....	.....	1	2
Connecticut	12	21	49	69	.....	1	.....	1	4	2
Delaware	1	2	8	10	.....	.....	.....	.....	1	1
District of Columbia	11	11	50	40	.....	.....	.....	1	1	.....
Florida	9	10	9	25	.....	.....	.....	.....	1	1
Georgia	18	19	18	46	.....	.....	.....	.....	4	6
Hawaii	4	3	50	32	.....	.....	.....	.....	1	1
Idaho	5	7	5	21	.....	.....	.....	.....	1	1
Illinois	44	49	157	167	.....	1	.....	.....	10	10
Indiana	16	20	50	95	.....	1	.....	1	2	2
Iowa	13	20	65	87	.....	1	.....	.....	4	4
Kansas	8	7	21	24	.....	.....	.....	.....	2	1
Kentucky	11	17	.....	33	.....	1	.....	.....	.....	.....
Louisiana	5	10	30	36	.....	.....	.....	.....	2	1
Maine	7	24	26	48	.....	.....	.....	.....	2	2
Maryland	13	17	24	35	.....	.....	.....	.....	1	1
Massachusetts	29	39	110	123	.....	1	1	1	1	.....
Michigan	19	23	55	119	.....	1	.....	2	3	.....
Minnesota	17	17	30	35	.....	.....	.....	.....	4	4
Mississippi	14	10	.....	28	.....	1	.....	.....	.....	.....
Missouri	20	28	89	48	1	1	.....	2	5	.....
Montana	3	4	2	19	.....	.....	.....	.....	1	1
Nebraska	15	16	25	38	.....	1	.....	.....	1	.....
New Hampshire	8	8	22	43	.....	.....	.....	.....	2	2
New Jersey	30	30	77	93	.....	1	.....	.....	5	5
New Mexico	3	10	.....	18	.....	.....	.....	.....	.....	2
New York	115	100	411	438	1	2	.....	3	23	28
North Carolina	11	18	23	102	.....	1	.....	1	2	2
North Dakota	.....	5	.....	23	.....	.....	.....	.....	.....	1

State.	Medical officers.		Enlisted men.		Field hospitals.		Ambulance companies.		Hospital Corps detachments.	
	1910	1912	1910	1912	1910	1912	1910	1912	1910	1912
Ohio	49	52	46	197	.....	2	1	2	1	.....
Oklahoma	4	4	24	31	.....	1	.....	.....	1	.....
Oregon	8	15	49	42	.....	.....	1	1	1	.....
Pennsylvania	55	58	143	136	.....	.....	.....	.....	13	13
Rhode Island	9	10	27	39	.....	1	.....	.....	1	.....
South Carolina	7	13	33	47	.....	.....	.....	.....	3	3
South Dakota	2	6	.....	8	.....	.....	.....	.....	.....	1
Tennessee	11	17	26	90	.....	1	.....	1	3	3
Texas	16	15	20	.....	.....	.....	.....	.....	1	.....
Utah	4	4	10	10	.....	.....	.....	.....	1	1
Vermont	2	3	10	24	.....	.....	.....	.....	1	1
Virginia	12	15	24	42	.....	.....	.....	.....	3	.....
Washington	6	6	32	30	.....	1	.....	.....	1	.....
West Virginia	9	7	24	23	.....	.....	.....	.....	1	1
Wisconsin	15	14	40	42	.....	.....	.....	.....	3	3
Wyoming	3	4	12	14	.....	.....	.....	.....	1	3
Total	720	841	2,010	2,813	2	20	3	16	125	118

CONSTRUCTION AND REPAIR OF HOSPITALS.

During the past year plans and specifications were prepared and contracts were entered into for isolation hospitals at the Walter Reed General Hospital, D. C., and at Fort D. A. Russell, Wyo., for additions to the Army Nurse Corps Home, and the main hospital building at the Walter Reed General Hospital, D. C. Additions are also under construction to the post hospital at Fort D. A. Russell, Wyo., and the Letterman General Hospital, San Francisco, Cal., Fort Monroe, Va., Presidio of Monterey, Cal., Fort Yellowstone, Wyo., Fort Sill, Okla., and Fort Shafter, Honolulu, H. I. Plans and specifications were also prepared for an isolation hospital to be erected as Fort Benjamin Harrison, Ind., but the bids were in excess of the amount authorized, $20,000, and were rejected. Effort will be made to have this isolation hospital erected during the coming fiscal year. All of the work contracted for is in course of erection.

The following buildings contracted for during the fiscal year ending June 30, 1911, have been completed: Isolation hospitals at the Letterman General Hospital, San Francisco, Cal., Fort Monroe, Va., Fort Sam Houston, Tex., Nurses' Home, and the mortuary at the Walter Reed General Hospital, D. C.; additions to the hospitals at Fort Monroe, Va., Fort George Wright, Wash., Fort Strong, Mass., Fort Screven, Ga., Fort Totten, N. Y., Fort Sheridan, Ill., Fort Andrews, Mass., Fort Du Pont, Del.; officers' ward for Letterman General Hospital, San Francisco, Cal.; enlarging boiler house at the Army and Navy General Hospital, Hot Springs, Ark., and a central dispensary for Fort Winfield Scott, Cal. The hospital at the Recruit Depot, Angel Island, Cal., for the erection of which a special appropriation of $60,000 was authorized, is not yet completed. It is being erected by administration.

An allotment of $40,000 was made from the appropriation for construction and repair of hospitals for use in the Philippines Division during the fiscal year, and of $2,500 from the appropriation for quarters for hospital stewards to cover the cost of quarters for Hospital Corps sergeants, first class, in this division. In addition to the

foregoing the Army general hospitals and the hospitals at military posts were improved or kept in proper repair so far as funds would permit. The Army and Navy General Hospitals, Hot Springs, Ark., needs additional buildings and grounds to meet the increased demands being made for accommodations. The following improvements are considered necessary for this general hospital: One officers' ward building, one officers' bath house, one officers' mess hall, one double set of officers' quarters, one two-story ward for veterans, one additional story on each of wards Nos. 4 and 5, one medical and physical gymnasium, one Hospital Corps barrack building, one double set of Hospital Corps sergeants' quarters, one nurses' building, and roads, walks, and grading, together with the necessary plans, surveys, etc. These improvements are estimated to cost $350,000.

New hospital buildings are required at numerous military posts to replace old and dilapidated structures which have been in use for many years, and which require large sums of money annually for repairs or improvements. New structures of a modern type would be economical, but it is impossible to erect a suitable modern military hospital for the maximum sum allowed by law from the general appropriation for such purposes. Section 1136, Revised Statutes of the United States, limits the cost of permanent structures to $20,000, unless special authority be first obtained from Congress. This law was enacted in 1853, when material and labor were much lower in price than they are at present. This statute should be modified to suit the present conditions.

New and modern hospitals should be erected at the following military posts in the near future:

Fort McPherson, Ga.—The hospital at this post is in size entirely inadequate. It is located in close proximity to a railroad and has no cellar except a small excavation for a heating apparatus, which was made some years after the building was erected. The heating and ventilation are not suitable for a modern hospital. The plumbing is crude, and efforts have been made from time to time to improve it, but it falls far short of meeting the modern sanitary requirements. The operating room is located in a small annex, with a small laboratory adjoining. There is no instrument room, etherizing room, preparation, recovery rooms, nor surgical ward. There is no suitable ward for the isolation of contagious diseases nor prison ward, and the Hospital Corps detachment is quartered in an old temporary wooden building, which was erected for use as a ward during the Spanish-American War. The mess room and kitchen are too small, and are unsuited for their purposes, it being necessary to set tables two or three times to accommodate the patients. The entire hospital is such that it would be in the interest of economy to replace it with a modern structure. A hospital should be erected of capacity for 87 beds for patients and the necessary room for attendents. The estimated cost of such a building is $90,000.

Post of Washington Barracks, D. C.—A small hospital was erected at this station in 1893. This became a general hospital in 1898, and was abandoned as such upon the completion of the Walter Reed General Hospital in 1909. It is to be torn down to secure room to complete a barracks building, which is now partly erected. Some provision should be made for sick call, administrative purposes, and for the temporary care of the sick at this post. A central infirmary,

with one small ward, a receiving room, office, etc., to care for the sick until such time as the patients can be moved to the Walter Reed General Hospital will answer the purpose. Such a building, in keeping in appearance with the other buildings at the post, is estimated to cost $25,000.

Fort Hamilton, N. Y.—In 1904 the commanding officer of this post stated that the present post hospital was entirely inadequate for the needs of the garrison, that there was insufficient space for attendants, that there was no isolation ward nor prison ward, and that in the rearrangement of the post a better site had been selected. In 1906 the chief surgeon, department of the East, stated that the hospital was very badly located, standing on rather low ground facing at a distance of 14 yards a noisy public highway, on the other side of which were saloons and other objectionable places of public resort. In view of these circumstances the interests of the service will be best subserved by erecting a modern hospital on a more appropriate site, especially as it is proposed to use the present building for a band barrack. A hospital of sufficient capacity for this post should contain 60 beds for patients and suitable accommodations for attendants, noncommissioned officers, etc. The estimated cost of such a building is $60,000.

Fort Dade, Fla.—It is understood that this is intended to become the main post in an artillery district. The present hospital is entirely inadequate and unsuitable. It is a temporary structure, with crude plumbing, lacks modern appliances, and the conditions are such that they can only be remedied by the erection of a new and modern hospital. In 1910 the Secretary of War approved a recommendation of the Chief of Coast Artillery that a new hospital be erected at this post. A suitable structure is estimated to cost $30,000.

Fort Logan H. Roots, Ark.—The hospital at this post is in accordance with modified plans for a two-story hospital, as shown in Circular No. 10, Surgeon General's Office, 1877, with no cellar, and heated by stoves. It has one ward for 12 beds on the second floor. In 1900 the surgeon stated that settling of the building caused the plastering to crack in numerous places. A small cellar was provided in an outbuilding for a heating plant. In 1904 the surgeon stated that the furnace was unsatisfactory in its location, being so far removed from the main building. The necessary pipes were laid under the porches and the open foundation of the hospital. This caused the loss of so much of the heat generated that it was almost impossible to keep the temperature up to the proper degree during cold weather.

In 1909 the Inspector General of the Army said the hospital at Fort Logan H. Roots, Ark., "needs the additions of isolation ward, storeroom, prison ward, and sleeping quarters for Hospital Corps men," and the chief surgeon said "no amount of addition, extension, or alteration can make it what it should properly be, and a new modern one will really be a saving to the Government." The Quartermaster General of the Army recommended that no further action be taken toward the enlargement of the present hospital, but that an entirely new hospital be constructed as soon as funds are available from the appropriation for construction and repair of hospitals. The Secretary of War approved this recommendation December 18, 1909. A suitable hospital for this post should have accommodations for 18 patients, 8 hospital corps privates, and 2 noncommissioned

officers. The estimated cost of such a hospital, owing to location, cost of material, transportation, etc., is $50,000.

Presidio of San Francisco, Cal.—The old hospital at this post, with the exception of a small portion used as a dispensary, has not been occupied since 1905. It was erected during the Civil War, has been unsuitable for hospital purposes for years, and is not properly located for use as a dispensary. A modern dispensary building is desired for this post, in a suitable location. It is recommended that the old hospital be abandoned and that those requiring hospital treatment be sent as at present to the Letterman General Hospital. It would require a large expenditure of funds to modernize the old hospital and render it suitable for modern hospital purposes, and it would be more economical to erect a new building. A suitable dispensary is estimated to cost $25,000.

Fort Benjamin Harrison, Ind.—One ward wing and the administration building of a modern hospital have been erected at this post, but the building has not been completed. It lacks one ward wing and a rear annex. It is insufficient in capacity, and in March, 1909, the surgeon recommended that the hospital accommodations at this post be doubled. The chief surgeon, Department of the Lakes, stated.

> It is important that the hospital at Fort Benjamin Harrison be completed at an early date, as the hospital facilities are inadequate even for the regular garrison, and are entirely so when the post is used as a base for the maneuver camp. One wing and the annex are yet lacking, and in fact less than half of the hospital has been completed.

The department commander stated that this hospital should be completed by adding the other wing and the rear annex required for the standard plan for a 60-bed hospital. To complete this building in the manner recommended is estimated to cost $40,000.

Fort Crook, Nebr.—The hospital at this post is inadequate. It lacks a suitable kitchen, mess room, Hospital Corps dormitory, prison ward, isolation ward, etc. It is purposed to add a rear annex to contain these rooms, thus relieving the administration building, and providing more room for patients, clerical work, etc. The estimated cost of a rear annex is $25,000.

Fort Des Moines, Iowa.—The hospital at this post has never been completed, and is inadequate. The administration building and one ward wing of the standard plan were erected. It lacks one ward wing and the rear annex. To complete this hospital by adding another ward wing and a rear annex is estimated to cost $40,000.

Fort Missoula, Mont.—The administration building and one ward wing of a new hospital have been completed at this post, but another ward wing and a rear annex are required to complete the building and to supply accommodations for a regimental post. To complete this hospital the estimated cost is $40,000.

Fort Niagara, N. Y.—The hospital at this post has 13 beds. The garrison is to consist of eight companies of infantry. This will require hospital accommodations for 32 patients, 15 Hospital Corps privates, and 4 noncommissioned officers. It is proposed to enlarge this hospital by adding another ward for 12 beds, and a rear annex to contain kitchen, mess hall, Hospital Corps dormitory, prison ward, isolation ward, etc. The estimated cost of these improvements is $35,000.

Whipple Barracks, Ariz.—The hospital at this post is inadequate. It lacks sufficient room for patients, attendants, prisoners, etc. An

addition to contain the rooms desired is estimated to cost $25,000, as the construction work at this post is very expensive.

Hawaiian Islands.—A large division hospital of not less than 300 beds will be needed in or near Honolulu for the proposed division of troops which are to be in garrison there. It would be better and in the end more economical to construct this hospital new throughout, but from motives of economy it has been decided to attempt the expansion of a small wooden hospital at Fort Shafter which is being enlarged by the erection of three pavilion wards. These wards will increase the capacity by about 60 beds, but no provision is being made for attendants, etc. In the opinion of this office accommodations should be provided for 100 additional patients. 52 Hospital Corps privates, 13 noncommissioned officers, modern operating rooms, isolation wards, etc. On account of the high cost of material and skilled labor the cost is estimated at $120,000.

Army General Hospital, Fort Bayard, N. Mex.—Authority was given to erect three additional ward buildings for this general hospital, but it was only possible to enter into contract for the erection of two of these wards; $50,000 is needed to erect the third ward building.

Seacoast Artillery posts.—Owing to the increase in Coast Artillery and the concentration of companies at various posts, it is necessary to increase the hospital accommodations by enlarging the buildings. Such has been done at several posts, but it is estimated that $100,000 will be required to complete the work.

Isolation hospitals.—Sixteen of these hospitals have been authorized, of which 13 have been completed, 2 are in course of erection, and 1 is to be contracted for. These buildings are absolutely necessary at large military posts, but it has not been possible to secure funds for more than three during any one year. It is essential to good sanitary administration in the Army that this policy be continued, and that provision be made promptly for the erection of isolation hospitals at military posts with a garrison of a regiment or more. At least 12 more of these hospitals will be necessary. At the rate of 3 in each year it will require 4 years to supply the most important posts, such as Fort Douglas, Fort Snelling, and Vancouver Barracks. These hospitals are for patients suffering with infectious diseases, and for those under observation until the diagnosis is determined. They contain, in addition to the wards, dressing rooms, serving rooms, toilet rooms, nurses' rooms, diet kitchens, a mortuary, and a complete disinfecting plant when necessary.

Hospital Corps sergeants' quarters.—Owing to the limited appropriation for these buildings, it was not possible to erect additional quarters. A number of large military posts are in need of quarters for these noncommissioned officers, and the appropriation should be liberal until such time as the Hospital Corps sergeants are supplied with suitable habitations. The Philippines Division is in need of funds for this purpose, $12,000 being requested by the division commander, but it was only possible to supply $2,500. All the quarters at military posts already established and occupied have been repaired, improved, and kept in good condition so far as the limited appropriation would permit.

The Army Medical School occupies a rented building in the city of Washington. As it is one of the permanent service schools it would be much more economical, as well as more fitting and convenient, for

it to be housed in buildings erected by the Government. It is proposed to locate these on the tract of land occupied by the Walter Reed General Hospital, so that the students may have the clinical advantages and the instruction in administration afforded by the hospital, and that the hospital may enjoy the laboratory conveniences of the school. These buildings are estimated to cost $350,000.

Estimates for new construction which is absolutely essential to the proper care of the sick have been for some years lopped off of the estimates in accordance with the instructions of the Secretary in order to reduce the War Department estimates until the necessities of the department in this respect have become very urgent and have accumulated to a large total. The following are the items which are considered to be immediately necessary and are accordingly included in the estimate laid before the Secretary for the fiscal year 1913–14:

Hospital:	
Fort McPherson, Ga.	$90,000
Fort Hamilton, N. Y.	60,000
Fort Logan H. Roots, Ark.	50,000
Fort Dade, Fla.	30,000
Dispensary, Presidio of San Francisco, Cal.	25,000
Dispensary, Washington Barracks, D. C.	25,000
Three isolation hospitals.	60,000
To enlarge and improve hospitals at artillery posts.	100,000
Enlargement of hospital:	
Fort Benjamin Harrison, Ind.	40,000
Fort Des Moines, Iowa.	40,000
Fort Crook, Nebr.	25,000
Fort Missoula, Mont.	40,000
Fort Niagara, N. Y.	35,000
Whipple Barracks, Ariz.	25,000
Additional buildings, Fort Shafter, Hawaii.	120,000
Construction and repair, Philippine Islands.	120,000
Army Medical School, Washington, D. C.	350,000
Army and Navy General Hospital, Hot Springs, Ark.	350,000
Additional ward, general hospital, Fort Bayard, N. Mex.	50,000
Repairs, hospitals, all posts in the United States.	200,000
Repairs and additions to general hospitals.	125,000
Total for construction and repair of hospitals.	1,960,000
Quarters for sergeants, Philippine Islands.	12,000
Quarters for sergeants, all posts in the United States.	75,000
Total for Hospital Corps sergeants' quarters.	87,000

MEDICAL AND HOSPITAL SUPPLIES.

The appropriation made by Congress for the fiscal year 1912 for the support of the Medical Department was $700,000, this being the amount asked for in the estimates submitted by the honorable the Secretary of War.

The aim of the department to increase steadily the quantity of field supplies in store for use in active campaign has been followed in so far as possible during the past year, and progress has been made in the collection of additional items of this nature. The amount expended for field supplies during this year was $143,152.29.

Medical supply depots have been maintained at the same points at which they were maintained during the previous fiscal year, and the service of supply has been very satisfactorily met.

Supplies to the value of $77,929.76 were issued to the Philippines during the year.

Experiments have been made in the matter of motor ambulances, and four were obtained with the commercial truck chassis with a view to carrying out the policy outlined in the last report of providing a standard commercial truck on which the ambulance body might be mounted. In this endeavor it is realized that the department erred on the side of strength and durability, and secured trucks which were too heavy for the apparatus contemplated. It is believed, however, that the experience gained in this matter is of great value; the trucks are of superior type, and can be turned over to the Quartermaster's Department for use in ordinary trucking work. A truck of medium weight will be procured during the present year, and it is thought that a more satisfactory result will be obtained.

Very satisfactory results have attended the efforts to provide portable X-ray machines, and the department is now in possession of three sets of apparatus of this type, and has arrived at a very fair determination as to what this apparatus should embody to produce excellent radiographic results from machines of portable type.

The packsaddle for field transportation of medical supplies is proving to be most satisfactory, and the department is now in possession of approximately 300 of these appliances for issue to such units of the Medical Department field equipment as may require the saddle in field service.

It is thought that steady advance has been made in the quality and variety of medical and surgical supplies for use both in field and post service, and the progress of specialization in the medical sciences has been amply met by the provision of apparatus suitable to the prosecution of the specialties, etc.

During the fiscal year 1912 serviceable Army medical stores were transferred to other branches and instrumentalities of the Government and issued or sold to States for the use of the Organized Militia and to civilians with the Army in the total amount of $99,533.10, as shown by the records of this office on June 30, 1912. Of this amount, $75,030.22 had on or before June 30 been placed to the credit of the replacing fund established by the act approved June 12, 1906 (34 Stats., 256), and the balance of $24,502.88 outstanding was then in the course of settlement. All of this sum will be available during the fiscal year 1913 to obtain a new supply of such stores in place of those so transferred, issued, and sold. The details of these transactions follow:

A. Supplies issued to States and Territories for the use of the Organized Militia, under section 1661, Revised Statutes, and appropriations supplementary thereto:

Arizona	$369.30
California	684.77
Colorado	58.74
Connecticut	2,224.39
Delaware	89.76
District of Columbia	66.40
Florida	869.71
Georgia	255.16
Hawaii	475.19
Idaho	1,067.75
Illinois	9,071.12
Indiana	1,328.89

A. Supplies issued to States and Territories for the use of the Organized Militia, etc.—Continued.		
Iowa	$411.90	
Kentucky	3,874.25	
Maine	474.33	
Maryland	62.50	
Massachusetts	4,496.53	
Michigan	769.85	
Minnesota	994.73	
Mississippi	43.75	
Missouri	3,794.87	
Montana	1,202.50	
Nebraska	1,109.76	
New Hampshire	295.70	
New Jersey	3,294.58	
New York	7,994.35	
North Carolina	2,505.64	
North Dakota	1,022.79	
Ohio	3,061.06	
Oklahoma	186.25	
Oregon	885.20	
Pennsylvania	465.63	
Rhode Island	2,514.77	
South Carolina	286,04	
South Dakota	184.02	
Tennessee	3,800.48	
Utah	14.40	
Vermont	156.73	
Virginia	38.40	
Washington	37.25	
West Virginia	35.28	
Wisconsin	355.19	
Wyoming	491.00	
		$61,420.91
B. Sales to States under section 17, act of Jan. 21, 1903 (32 Stats., 778):		
California	29.32	
Florida	17.75	
Georgia	5.71	
Indiana	35.99	
Iowa	246.91	
Maryland	26.48	
Massachusetts	67.63	
Nebraska	42.70	
Ohio	6.25	
New York	40.27	
Pennsylvania	288.45	
Tennessee	937.11	
Virginia	25.93	
Wisconsin	93.13	
		1,863.63
C. Supplies transferred to other bureaus and departments of the Government:		
Quartermaster's Department, United States Army	2,936.70	
Engineer Department, United States Army	24.00	
Isthmian Canal Commission	9,795.34	
Interior Department	7.20	
Navy and Marine Corps	9,003.93	
Department of Agriculture	465.63	
Department of Justice	13.50	
		22,246.30
D. Sales to the civil government of the Philippine Islands		158.32
E. Sales to the United States Soldiers' Home		5,043.07
F. Sales to the American National Red Cross		826.61
G. Sales to civilian employees of the Army and civilians		7,974.26
Total		99,533.10

LIBRARY OF THE SURGEON GENERAL'S OFFICE.

The renovation of the building occupied by the library and museum was completed during the fiscal year and included besides repainting the interior, the installation of entirely new plumbing and extensive repairs to the roof and heating plant.

The library has suffered severely during recent years from the loss of old employees who had been with the institution from its inception and whose experience and special knowledge made possible the conduct of the library with a minimum clerical force. The places of these men have been filled by new clerks from the civil-service list, who, however promising, had not specially qualified for library work, and who must necessarily consume time in familiarizing themselves with their duties. Much time is lost in filling vacancies as about a month is required in each case to obtain certifications to make the selection and to appoint the candidate. The force is also crippled by the age and infirmities of several of its members still in service. The work of the library both in its service to the public and in its cataloguing has therefore gradually and inevitably dropped behind. Yet a comparison recently made of the catalogue work of different years shows that, compared with twenty years ago, fully twice as many titles are now carded and indexed. Some addition to the force is therefore required and especially should there be provision for two translators at $1,800 in lieu of two clerks of class 2. This change will at an additional cost of $800 per annum provide for two specialists at a reasonably good salary, and make it possible in case of vacancy to acquire men with a knowledge of both medicine and of foreign languages.

Volume XVII of the index catalogue is in course of preparation and will appear in due time, but, owing to the weakness of the clerical force from conditions already mentioned, the appearance of the volume is delayed.

A noteworthy feature of the forthcoming volume is a classified list of the many texts in the library illustrating the history of medicine. This covers 90 pages and authority has been received to reprint the sheets in separate form for use in this and other institutions.

The great progress made in medical science in recent years is represented in an interesting manner by the current volume of the Index Catalogue. The subject "Syphilis" and its subdivisions there covers 208 pages. The same subject covered in the first series of the Index Catalogue in 1893, 118 pages. This is also an illustration of the increasing work of the library force.

During the year 476 books and 3,705 pamphlets and journals were presented to the library.

The following table shows the additions made to the library during the year 1911–12:

	On hand June 30, 1911.	Added during fiscal year.	Total June 30, 1912.
Medical journals	54,744	1,233	56,007
Medical transactions	8,718	50	8,768
Bound theses	2,604	45	2,649
Bound pamphlets	3,092	25	3,127
Other medical books	106,349	1,728	108,077
Total	175,507	3,111	178,628
Medical theses	87,095	2,693	89,788
Medical pamphlets	223,715	2,088	225,803
Total	310,810	4,781	315,591

ARMY MEDICAL MUSEUM.

The total number of specimens in the museum at the close of the fiscal year June 30, 1912, is 34,598.

The following statement shows in detail the additions and changes in the different sections:

Pathological section:		
In museum June 30, 1911		12,989
Discarded	39	
Donated	10	
		49
		12,940
Received during the year		44
In museum June 30, 1912		12,984
Anatomical section:		
In museum June 30, 1911		1,186
Discarded	1	
Donated	4	
		5
		1,181
Received during the year		16
In museum June 30, 1912		1,197
Section of comparative anatomy:		
In museum June 30, 1911		693
Discarded	22	
Donated	48	
Transferred	4	
		74
In museum June 30, 1912		619
Microscopical section:		
In museum June 30, 1911		12,916
In museum June 30, 1912		12,916
Miscellaneous section:		
In museum June 30, 1911		3,380
Donated		1
		3,379
Received during the year		313
In museum June 30, 1912		3,692
Provisional pathological section:		
In museum June 30, 1911		368
Discarded		93
In museum June 30, 1912		275
Provisional anatomical section:		
In museum June 30, 1911		371
In museum June 30, 1912		371
Photographic section:		
In museum June 30, 1911		2,544
In museum June 30, 1912		2,544
Recapitulation:		
In museum June 30, 1911		34,447
Discarded, donated, and transferred		222
		34,225
Added during the year		373
In museum June 30, 1912		34,598

The following are some of the more interesting specimens in the pathological section received during the year ending June 30, 1912:

Malformations.—Specimen 14253, two eggshells of a duck partly joined together as if a composite monster; contributed by Mr. Harry Hyamn, East Arlington, Va. Specimen 14236, dipygus parasiticus in a chicken; contributed by Mr. J. S. Thomas, Washington, D. C.

Injuries.—Specimen 14231, shot perforation of skull; contributed by Maj. James Wilson, Medical Corps, United States Army. Specimen 14266, fracture of left humerus from a fall; soldier, age 42; died of heart failure third day; contributed by First Lieut. J. L. Robinson, Medical Corps, United States Army.

Diseases of bone.—Specimen 14259, osteo-sarcoma of head of fibula; removed by operation; contributed by Dr. H. H. Kerr, Washington, D. C. Specimen 14237, osteitis deformans of lower jaw; from an Indian mound; contributed by Mr. C. B. Moore, Philadelphia, Pa.

Skin.—Specimen 14727, large keloid removed from back of negro man; second operation; contributed by Dr. D. O. Leech, Washington, D. C. Specimen 14226, fibroma of male breast; removed by operation from man, age 60; no history of injury; one sister died of cancer of uterus; contributed by Dr. J. W. Bird, Sandy Springs, Md.

Eye.—Specimen 14246, a dacryolite; specimen 14247, a portion of ossified crystalline lens; specimen 14248, piece of wood removed from orbit of boy 11 years old, six weeks after entrance; specimen 14249, cataract; specimen 14250, ossification of choroid; specimen 14251, pterygia; contributed by Dr. J. R. L. Hardesty, Washington, D. C.

Brain.—Specimen 14235, glioma of left frontal lobe; removed after death from woman, age 29; contributed by Dr. Frederick Yates, Washington, D. C. Specimen 14243, tumor of left thalamus that caused hemorrhage and dilatation of ventricles; removed after death from woman, age 25; contributed by Dr. W. P. Carr, Washington, D. C.

Lung.—Specimen 14264, carcinoma of right lung, apparently primary, no secondary growths found; removed after death from a soldier; contributed by First Lieut. Henry Beeuwkes, Medical Corps, United States Army.

Mesentery.—Specimen 14224, cysto-myxoma; removed from boy, age 16; contributed by Dr. J. F. Mitchell, Washington, D. C.

Stomach.—Specimen 14260, carcinoma; removed from soldier, age 49; contributed by Lieut. Col. W. D. Crosby, Medical Corps, United States Army. Specimen 14238, carcinoma of stomach and head of pancreas; removed after death from woman, age 69; same case as 14239, infra; contributed by Dr. M. L. Strobel, Washington, D. C.

Small intestine.—Specimen 14245, diverticulum of ileum containing chicken bone; removed by operation; contributed by Dr. J. R. Wellington, Washington D. C.

Vermiform appendix.—Specimen 14233, inflammation of appendix which contained a pistol bullet; removed by operation from an Army officer; recovery; contributed by Capt. P. L. Freeman, Medical Corps, United States Army.

Large intestine.—Specimen 14241, enormous dilatation and hypertrophy from ileocolic valve to sigmoid; removed by operation from woman, age 42, who had chronic constipation; recovery; contributed by Dr. H. H. Kerr, Washington, D. C.

Liver.—Specimen 14239, carcinoma; the liver weighed about 6 pounds; same case as specimen 14238, supra cancer of stomach; contributed by Dr. M. L. Strobel, Washington, D. C. Specimen 14240, echinococcus cyst of liver; contributed by Dr. W. F. M. Sowers, Washington, D. C. Specimen 14265, multiple abscesses of liver; due to suppurative cholecystitis; soldier, age 36; contributed by Col. Charles Richards, Medical Corps, United States Army.

Heart.—Specimen 14230, acute pericarditis; from a soldier; contributed by Lieut. Col. H. J. Raymond, Medical Corps, United States Army.

Thyroid and thymus glands.—Specimen 14225, adenoma of thyroid and hypertrophy of thymus; removed after death from boy 7 years old; contributed by Dr. J. F. Mitchell, Washington, D. C.

Kidney.—Specimen 14244, hypernephroma; removed from man, age 65; recovery; contributed by Dr. I. S. Stone, Washington, D. C. Specimens 14261 and 14262, large cysts; no symptoms; from man, age 50 and woman, age 60, respectively; contributed by Dr. Ralph M. Le Comte and Dr. W. J. Mallory, Washington, D. C., respectively.

Uterus.—Specimen 14223, sarcoma; removed from woman, age 57; contributed by Dr. I. S. Stone, Washington, D. C.

Ovary.—Specimen 14263, large cyst; from chicken; removed after death; contributed by Dr. I. H. Lamb, Washington, D. C.

The following instruments have been donated to or purchased by the museum during the year ending June 30, 1912, and placed in the miscellaneous section:

Specimen 3550, aero-picnometer. Specimens 3537 and 3538, æsthesiometers. Specimen 3551, albuminometer. Specimens 3844 to 3846, bone forceps; contributed by the De Vilbiss Manufacturing Co., Toledo, Ohio. Specimens 3556 and 3557, clinical thermometers. Specimens 3554 and 3555, cryoscopes. Specimen 3600 old dental case; contributed by Mr. R. D. Suter, Washington, D. C. Specimen 3710, ear syringe. Specimen 3568, enema syringe. Specimen 3548, sieve for feces. Specimen 3744, forehead mirror. Specimen 3547, gastralgesimeter. Specimen 3539, gonometer. Specimen 3546, hæmometer. Specimen 3545, hæmoscope. Specimens 3565 to 3567, 3574 to 3580, 3805, hypodermic syringes. Specimens 3565 to 3567; contributed by Dr. G. N. Acker, Washington, D. C. Specimens 3774 to 3776, lymph containers. Specimens 3558, 3559, and 3712, microscopes. Specimens 3743 and 3792, ophthalmoscopes. Specimen 3848, otoscope. Specimens 3569, 3570, 3573, 3581 to 3599, 3728 to 3732, 3742, 3746 to 3773, 3794 to 3804, 3806 to 3929, 3831 to 3835, scarifiers and vaccinators. Specimens 3540 to 3544, and 3791, sphygmomanometers. Specimen 3745, sterilizer. Specimen 3572, stethoscope. Specimen 3793, stretcher. Specimen 3711, tongue depressor. Specimen 3571, tonsillotome. Specimen 3847, trephine and drill; contributed by the De Vilbiss Manufacturing Co., Toledo, Ohio. Specimen 3552, urine apparatus. Specimen 3549, ureometer. Specimen 3553, uroscope. Specimen 3603, vaccine ampulla. Specimens 3830, 3836 to 3843, vaccination dressings. Specimens 3601 and 3602, vaginal specula. Specimens 3605 to 3670, 3733 to 3741, vacuum apparatus.

Also a series of old-style weapons. Miscellaneous section: Specimens 3677 to 3683, arrows. Specimens 3671 to 3676, bows. Specimens 3686 to 3706, 3708, 3709, 3777, to 3779, and 3787, guns. Specimens 3604, 3780 to 3786, 3788 to 3790, pistols. Specimen 3707, spear.

Also a series of mosquitoes. Miscellaneous section: Specimen 3684, contributed by Dr. S. D. Darling, Canal Zone; and specimen 3685, contributed by Dr. C. S. Ludlow, Washington, D. C. Also a model of the mosquito, specimen 3560.

In the anatomical section: Specimen 4109, plaster cast of the prehistoric Mauer jaw; and specimens 4110 to 4119, plaster casts of bones of the *Homo mousteriensis*, also prehistoric.

During the year three papers were prepared by the pathologist, Dr. D. S. Lamb, in regard to the specimens in the museum. These papers were read before the Medical Society of the District of Columbia and published in the journal of the society as follows:

"Malformations and monstrosities in the Army Medical Museum;" Washington Medical Annals, March, 1912, page 34.

"Epidemic cholera;" specimens in the Army Medical Museum; same journal, May, 1912, page 104.

"Specimens in the Army Medical Museum from prehistoric peoples;" same journal, May, 1912, page 109.

ARTIFICIAL LIMBS AND APPARATUS.

Under laws relating to artificial limbs and apparatus, or commutation therefor, orders on manufacturers were given during the fiscal year for 94 artificial legs, 1 foot, and 5 arms. Commutation certificates were issued for 1,557 cases of amputated leg, 1,569 of amputated arm, 40 of amputated foot, and 1,777 cases of loss of use of limb.

Under the act of June 17, 1870, and subsequent amendments thereto, 23,527 disabled soldiers and sailors have been furnished artificial limbs or apparatus, or have received commutation in money since the passage of the act, as follows: Total number benefited to June 30, 1912, 23,527; died, 13,851; dropped from rolls, 592; rejected after one or more payments, 571; remaining on rolls at end of fiscal year, 8,513, being a loss of 893 beneficiaries during the year.

It is estimated that the sum of $85,000 will be required to pay the claims coming due during the fiscal year ending June 30, 1914.

APPLIANCES AND TRUSSES.

One hundred and thirty-nine appliances were issued during the fiscal year and 409 trusses were furnished and fitted.

ARTICLES BY MEDICAL OFFICERS.

Articles by medical officers of the Army approved for publication by the Surgeon General's Office, July 1, 1911, to June 30, 1912.

Author.	Article.	Published in—
Allen, First Lieut. W. H.	Anesthesia, with especial reference to nitrous oxide and its sequences.	Journal of the American Medical Association, 1911.
Ashburn, Maj. P. M.	A case of alkaptonuria and ochronosis from the medical service of the United States Army general hospital, Presidio, San Francisco, Cal.	The Military Surgeon, October, 1911.
Ashford, Capt. Mahlon	The mission of the ambulance company	The Military Surgeon, January, 1911.
Banister, Lieut. Col. W. B.	Venereal prophylaxis in the Central Division.	The Military Surgeon, 1911.
Barber, Capt. John R.	See Tropical Diseases, Board for the Study of.	
Bloombergh, Capt. Horace D.	A study of the influence of rice diet and of inanition on the production of multiple neuritis of fowls and the bearing thereof on the etiology of beriberi.	The Military Surgeon, August, 1911.
	The Wassermann reaction in syphilis, leprosy, and yaws.	Philippine Journal of Science, October, 1911.
Bratton, Maj. Thomas S.	A case of strangulated inguinal hernia	The Military Surgeon, June, 1912.
Brechemin, Maj. Louis	Sale of beer in post exchanges	Journal of the American Medical Association, 1912.
Brewer, First Lieut. Isaac	The treatment of seasickness	1912.
Bushnell, Col. George E.	The diagnostic use of tuberculin in pulmonary tuberculosis.	New Mexico Medical Journal, December, 1911. (Reprint.)
	Some extra pulmonary sounds which simulate râles.	The Medical Record, 1912.
Chamberlain, Maj. W. P.	See Tropical Diseases, Board for the Study of.	
Christie, Capt. A. C.	Vaccines in suppurative otitis media	Journal of the American Medical Association, 1912.
	Report of an epidemic of measles at Columbus Barracks, Ohio, with some remarks on the manner of the transmission of the disease.	The Military Surgeon, October, 1911.
Clarke, Lieut. Col. Joseph T.	The organization of the Medical Department of the Army.	Read before the Portland City and County Medical Society and published in the local medical journals, 1912.
Cole, Capt. Clarence	Case of an applicant for enlistment who was found upon examination to have a complete cervical rib on the right and from an X ray taken by the surgeon found to have a rudimentary cervical rib on the left.	The Military Surgeon, 1911.
	Leucopenia in typhoid fever and early diagnostic symptoms.	The Military Surgeon, June, 1911.
	Perforation of a false diverticulum, small intestine about 18 inches above caecum. Early operation—recovery.	Journal of the American Medical Association, 1912.
Cooper, First Lieut. Alexander.	A report on the Wassermann reaction as influenced by treatment.	Do.
	Some tests as to the efficacy of chlorinated lime in purifying drinking water.	The Military Surgeon, May, 1912.
Craig, Capt. Charles F.	The prophylaxis of malarial infection	The Southern Medical Journal, July, 1911.
	The relation of certain bacteria to non-specific reactions with the complement fixation test for lues.	Journal of Experimental Medicine, No. 4, 1911.
	The parasitic amebae of man	(Octavo.) J. B. Lippincott Co., Philadelphia, July, 1911.
	The effect of the ingestion of alcohol on the result of the complement fixation test in syphilis.	Journal of the American Medical Association, Aug. 5, 1911.
	The immediate effect on the complement fixation test for lues of treatment with salvarsan.	Archives of Internal Medicine, September, 1911.
	Further observation on the complement fixation test in lues.	Journal of Infectious Diseases, November, 1911.
	Important factors in the prophylaxis of the malarial fevers.	The Southern Medical Journal, December, 1911.
	Observations upon the morphology of parasitic and cultural amebae.	Journal of Medical Research, April, 1912.
	A study of the complement fixation in syphilis with spirochaeta culture antigens.	Journal of Experimental Medicine, 1912.

Articles by medical officers of the Army approved for publication by the Surgeon General's Office, July 1, 1911, to June 30, 1912—Continued.

Author.	Article.	Published in—
Darnall, Maj. C. R	Water purification by anhydrous chlorine	American Journal of Public Health, 1911.
Davidson, Maj. W. T	Report of a case of gunshot wound of the chest made with suicidal intent in a soldier of Company B, Twenty-third Infantry.	1911.
	Venereal prophylaxis	1911.
	Additional note on venereal prophylaxis	The Military Surgeon, 1912.
de Niedman, First Lieut. Wm. F.	Poisoning by dinitro-benzine	The Military Surgeon, 1912.
	Lime salts for troops	The Military Surgeon, September, 1911.
Duncan, Capt. Louis C	The Medical Department of the Army in the Civil War—The Battle of the Wilderness.	The Military Surgeon, April, 1912.
	The Medical Department of the Army in the Civil War—The Battle of Bull Run.	The Military Surgeon, June, 1912.
Ekwurzel, Maj. Geo. M	Observations of a regimental surgeon, "Maneuver division."	The Military Surgeon, 1911.
	The Army Hospital Corps: How can its efficiency be increased.	The Military Surgeon, August, 1911.
Ferenbaugh, First Lieut. T. L., and Gentry, First Lieut. E. R.	Two reports on endemic Mediterranean fever in Texas.	Journal of the American Medical Association, Sept. 9 and Sept. 23, 1911.
	Endemic Mediterranean fever in southwest Texas.	Journal of the American Medical Association, Sept. 30, 1911.
Fields, Maj. P. C	Observations of eye, ear, nose, and throat in leprosy.	Military Surgeon, June, 1912.
Ford, Maj. Clyde S	Special report of a case of endo-aneurysmorrhaphy.	———, 1912.
Ford, Maj. J. H	Report as sanitary inspector of First Separate Brigade.	The Military Surgeon, 1911.
	Galveston maneuver camp	The Military Surgeon, September, 1911.
	Regulations for the government of post hospitals.	The Military Surgeon, July, 1911.
Foster, First Lieut. Geo. R	Cutaneous sporotrichosis	Journal of the American Medical Association, 1912.
Fox, First Lieut. James S	On the prophylactic treatment of syphilis and some few practical points derived from the treatment of over 100 cases with Ehrlich's salvarsan ("606").	The Military Surgeon, 1911.
French, First Lieut. S. W	The value of medical statistics	The Military Surgeon, May, 1912.
	Some suggestions for a modified iodine container.	The Military Surgeon, 1912.
Fronk, First Lieut. Clarence E.	Operation for gunshot wound of gall bladder.	The Military Surgeon, June, 1912.
Gentry, First Lieut. E. R	See Ferenbaugh.	
Halliday, First Lieut. Charles H., Medical Reserve Corps.	A report on "Low country fever" diagnosed as "Dengue."	The Military Surgeon, August, 1911.
Hartsock, Maj. F. M	Anti-typhoid vaccination	Read before Wayne County Medical Society of Detroit.
	Gunshot wounds in military surgery	Read before the Wayne County Medical Society and published in their journal, 1912.
Heflebower, First Lieut. R. C.	The prognostic value of the urochromogen and Diaz reactions in pulmonary tuberculosis.	———, 1911.
Hill, First Lieut. Even C	Important factors in reducing the high death rate in diphtheria.	———, 1911.
	Humanitarian warfare	———, 1912.
Howard, Maj. D. C	Venereal prophylaxis	The Military Surgeon, December, 1911.
	Important factors in the prophylaxis of the malarial fevers.	The Southern Medical Journal, 1911.
	Venereal prophylaxis (a supplementary report).	The Military Surgeon, April, 1912.
Hutton, Maj. Paul C	Report of surgical work done at the maneuver division.	The Military Surgeon, 1911.
Jones, First Lieut. Glenn I	Treatment of chronic influenza	Journal of the American Medical Association, 1912.
	An oral lesion in apparently cured syphilis	The Military Surgeon, 1911.
Jones, Capt. Harold W	The Indian medical service	The Military Surgeon, 1912.
Jones, Capt. Percy L	Disposition of garbage in barracks	The Military Surgeon, 1911.
Kean, Lieut. Col. J. R	The venereal problem in the Army and Navy.	The Military Surgeon, March, 1912 (reprints).
	The tribute to the Minotaur	Read before the Maryland Society of Social Hygiene and reprinted from the journal of that society.

Articles by medical officers of the Army approved for publication by the Surgeon General's Office, July 1, 1911, to June 30, 1912—Continued.

Author.	Article.	Published in—
Keller, Capt. W. L.	Further observations on the surgical treatment of Hallux valgus and bunions.	——, 1912.
Kilbourne, Capt. Edwin D.	See Tropical Diseases, Board for the Study of.	
Kremers, First Lieut. E. D.	A study on the vision of observers and gun-pointers in the Coast Artillery Corps.	The Military Surgeon, 1912.
	Notes on the Thirty-third Regiment of Chinese Infantry.	The Military Surgeon, August, 1911.
Lake, First Lieut. Geo B.	The use of cultures of staphylococcus pyogenes aureus in a curious outbreak of diphtheria.	——, 1912.
Lloyd, Dr. Samuel L., Medical Reserve Corps.	The relation of the Army surgeon to the community. (Address delivered at the closing exercises of the Army Medical School in Continental Hall, Washington, D. C.)	The Military Surgeon, May 31, 1912.
Lyster, Maj. Wm.	Venereal prophylaxis in the Army: The necessity of cooperation of line officers.	The Military Surgeon, July, 1911.
	The advantages of an accepted plan for latrine boxes.	The Military Surgeon, May, 1912.
Matson, Lieut. Ray W., Medical Reserve Corps.	Some dangers of salvarsan	The Military Surgeon, February, 1912.
Meehan, First Lieut. J. W.	The Medical Corps of the U. S. Army	Creighton Chronicle, University of Omaha, 1911.
Mueller, First Lieut. Armin.	A simple apparatus and technique for the intravenous injection of salvarsan.	The Military Surgeon, 1911.
Munson, Maj. Edward L.	The conduction of field maneuvers of militia sanitary troops.	The Military Surgeon, January, 1912.
	Military absenteeism in war (with special reference to the relation of the Medical Department thereto).	The Military Surgeon, May and June, 1912.
Nelson, Maj. Kent	Iodine and its use in typhoid inoculation	Journal of American Medical Association, 1911.
	Prophylaxis of venereal diseases in the Army.	Do.
Nichols, Capt. H. J.	The effect of the ingestion of alcohol upon the result of the complement fixation test in lues.	
	Fact and fancy about the hookworm	Medical Record, August, 1911.
	The immediate clinical results of the use of salvarsan in the Army.	The Military Surgeon, February, 1912.
	The present status of salvarsan therapy in syphilis.	Journal of American Medical Association, March 2, 1912.
	The use of salvarsan in diseases of the nervous system.	(Contributed to a publication on nervous diseases by Dr. Jelliffe and Dr. White.)
	A study of the complement fixation in syphilis with spirochæta culture antigens.	Journal of Experimental Medicine, 1912.
	Comparative observations on the biological character of sp. pallida and sp. pertenuis.	——, 1912.
O'Connor, Maj. R. P.	Shortening and advancement methods without employing sutures under tension.	Journal of the American Medical Association, 1912.
	A case of dislocation of a malar bone	The Military Surgeon, September, 1911.
Patterson, Maj. Robert U.	Some remarks on salvarsan with description of apparatus for intravenous administration.	The Military Surgeon, May, 1912.
Pierson, Capt. Robt. H.	Conditions of military surgery	Medical Sentinel, 1912.
Powell, Capt. Wm. A.	Report on Camp Wilhelm, Tayabas, P. I.	The Military Surgeon, October 1911.
Rand, Maj. Irving W.	A case of multiple rupture of the kidney by external violence.	New York Medical Times, 1912.
Reasoner, Capt. M. A.	Some dangers of salvarsan	The Military Surgeon, February, 1911.
	Routine methods in syphilis	The Medical Sentinel, 1911.
	Surgical treatment in gonorrheal epididymitis.	The Military Surgeon, 1911.
	One case of malaria treated by salvarsan	Do.
	Some miscellaneous notes	The Military Surgeon, September, 1911.
Rhoads, Maj. T. L.	The triumphs of preventive medicine	——, 1912.
Richards, Capt. Robert L.	Nervous and mental disorders in their military relations.	Sent to Dr. Wm. White, Government Hospital for the Insane.
Russell, Maj. F. F.	The isolation of typhoid bacilli from urine and feces with the description of a new double sugar tube medium.	Journal of Medical Research, September, 1911.
	Results of antityphoid vaccination in the Army in 1911 and its suitability for use in civil communities.	Journal American Medical Association, 1912.

Articles by medical officers of the Army approved for publication by the Surgeon General's Office, July 1, 1911, to June 30, 1912—Continued.

Author.	Article.	Published in—
Russell, Major, F. F.....	The "A. & N." tube as an efficient disinfectant in its use as a gonocide.	The Military Surgeon, 1912.
	The status of antityphoid vaccination.....	Paper read before the Ninth International Red Cross Conference.
	Results of antityphoid vaccination.....	Read before section of the American Medical Association, Atlantic City convenvention, June 3, 1912.
Schmitter, Capt. Ferdinand..	Gonorrheal arthritis, seminal vesiculitis....	The Military Surgeon, 1912.
	Observations on syphilis.....	Journal of the American Medical Association.
Shields, First Lieut. Wm. S..	Clinical observations on the use of salvarsan in the military service.	Bulletin Manila Medical Society, November, 1911.
Skinner, Maj. Geo. A.....	An unusual case of gunshot wound of the arm—recovery.	Journal of the American Medical Association, 1911.
	Gunshot fracture, both bones, forearm—recovery.	The Military Surgeon, 1912.
Smith, First Lieut. H. H., Medical Reserve Corps.	A scheme for carrying out venereal prophylaxis in the Army posts.	The Military Surgeon, 1911.
Smith, Capt. L. L.....	Dementia præcox and chronic alcoholism..	Do.
	Syphilis—a cause of mental diseases in the military service.	Do.
	(Translation.) Aphasia and apraxia (Dr. Bernard Glueck.)	
	(Translation.) The medical service of the Turkish Army (by Col. Voelbrecht.)	The Military Surgeon, 1912.
	(Translation.) Concerning the deterioration of canned meats.	———, 1912.
	(Translation.) Progress in the methods for the care of the insane in time of war. (Dr. Stier, Stabartz und Privatdozent—Berlin).	The Military Surgeon, March, 1912.
Straub, Maj. Paul F.....	Maneuver division.....	The Military Surgeon, December, 1911.
	Sanitation of the maneuver camp at San Antonio, Tex.	
Thomason, Capt. Henry D...	Sanitary troops in the Organized Militia of the United States.	The Military Surgeon, October, 1911.
Thornburgh, Maj. Robert M..	Treatment of a gunshot wound of the abdomen.	Annals of Surgery, Philadelphia, 1912.
Treuholtz, Lieut. C. H.....	The Wassermann reaction in diagnosis and treatment.	Bulletin Manila Medical Society, November, 1911.
Torney, Surg. Gen. Geo. H...	Address of the president of the Association of Military Surgeons of the United States (Twentieth annual meeting, Milwaukee, Wis.).	The Military Surgeon, November, 1911.
Tropical Diseases, Board for the Study of, as they exist in the Philippines.	Report for quarter ending Mar. 31, 1911.	The Military Surgeon, March, 1912.
	Report for quarter ending June 30, 1911.	The Military Surgeon, April, 1912.
	Report for quarter ending Sept. 30, 1911	The Military Surgeon, June, 1912.
	A summary of the work performed during the last two years by the board.	Journal of the American Medical Association, 1912.
	Typhoid fever in the Philippines.....	Philippine Journal of Science, October, 1911.
	Observations on the influence of the Philippine climate on white men of the blond and of the brunette type.	Philippine Journal of Science, December, 1911.
	A study of the systolic blood pressure and the pulse rate of healthy adult males in the Philippines.	Do.
	The red blood corpuscles and the naemoglobin of healthy adult American males residing in the Philippines.	Do.
	The occurrence in the Philippines of associated spirochaetae and fusiform bacilli in ulcers of the throat (Vincent's angina), of the mouth, and of the skin, and in lesions of the lungs (bronchial spirochaetosis).	Do.
	The Wassermann reaction in syphilis, leprosy, and yaws.	Philippine Journal of Science, October, 1911.
	The effect of ultra violet rays on amoebae, and the use of these radiations in the sterilization of water.	Philippine Journal of Science, November, 1911.
	A second contribution to the etiology of beriberi.	Do.

Articles by medical officers of the Army approved for publication by the Surgeon General's Office, July 1, 1911, to June 30, 1912—Continued.

Author.	Article.	Published in—
Tropical Diseases, Board for the Study of, as they exist in the Philippines.	A study of Arneth's nuclear classification of the neutrophiles in healthy adult males and the influence thereon of race, complexion, and tropical residence.	Philippine Journal of Science, November, 1911.
	The so-called X-bodies as artefacts in glass slides.	Do.
	The cure of infantile beriberi by the administration to the infant of an extract of rice polishings, and the bearing thereof on the etiology of beriberi.	Bulletin of the Manila Medical Society, February, 1912.
	Clinical observations on the use of salvarsan in the military service.	Bulletin of the Manila Medical Society, November, 1911.
	Medical observations at the prison stockade on Corregidor Island, Philippine Islands.	———, 1912.
	Fever of undetermined type occurring among the civil convicts on the island of Corregidor.	———, 1912.
	A third contribution to the etiology of beriberi.	———. 1912.
	Observations regarding the substance in rice polishings which prevents polyneuritis gallinarum and beriberi.	Read before the Second Biennial Congress of the Far Eastern Association of Tropical Medicine held at Hongkong, Jan. 20–27, 1912.
Tuttle, First Lieut. Geo. B., Medical Reserve Corps.	A case of chronic interstitial nephritis with very obscure symptoms.	The Military Surgeon, September, 1911.
Vedder, Capt. Edward B.....	Association prize essay: "What are the best available measures to diminish venereal diseases among soldiers and sailors and along what lines should we seek the cooperation of Federal, State, and municipal authorities."	The Military Surgeon, November, 1911.
	An experimental study of the action of ipecacuanha on amoebae.	Read before the Second Biennial Congress of the Far Eastern Association of Tropical Medicine held at Hongkong, January, 1912.
Weed, Capt. Frank W.....	A study of the foot and footwear.....	The Military Surgeon, February, 1912 (reprints).
Weston, First Lieut. H. R., Medical Reserve Corps.	Balantidium coli as a cause of dysentery in the Philippine Islands.	The Military Surgeon, June, 1912.
Whitmore, Maj. Eugene R...	Fevers of undetermined causation.....	Do.
Williams, Capt. A. W.....	Vaccination against typhoid in the U. S. Army.	American Journal of Medical Sciences, 1912.
	Modern treatment of acute appendicitis.....	The Military Surgeon, 1912.
	The Medical Corps and Medical Reserve Corps, U. S. Army. (Read before Jefferson Medical College, the Medico-Chi. Medical College, and the Sajons Therapeutical Society of Philadelphia.)	New York Medical Journal.
Woodbury, Maj. Frank T....	The best surgical disinfectant—tincture of iodine.	New York Medical Journal, 1912.
Woodruff, Lieut. Col. Chas. E.	Report on smallpox and vaccination.....	The Military Surgeon, July, 1911.

FINANCIAL STATEMENT, 1912.[1]

Medical and hospital department, 1912.

Appropriated by act approved Mar. 3, 1911.....		$700,000.00
Transfer to this head made by the Treasury Department to correct a disbursing error, from "Medical and hospital department, 1911".....	$1.70	
Other refundments during the year.....	27.69	
		29.39
Total to be accounted for.....		700,029.39

[1] The "disbursements" in this statement include settlements with public creditors made by the accounting officers of the Treasury and charged by them to these appropriations.

Disbursed during the year:		
Expenses of medical supply depots	$1,063.81	
Medical and hospital supplies	352,434.75	
Medical attendance and medicines (except at recruiting stations)	8,448.33	
Medical expenses of recruiting (including medical attendance and medicines at recruiting stations)	7,258.04	
Pay of nurses	1,380.00	
Pay of other employees	134,813.75	
Hospital laundry	40,254.39	
Expressage	414.72	
Gas and electricity for laboratory apparatus, etc	1,369.25	
Customs duties and internal-revenue taxes on medical supplies	420.58	
Miscellaneous	114.88	
		$547,972.50
Balances on hand June 30, 1912:		
In United States Treasury	97,483.47	
In transit from disbursing officers to the Treasury	1,719.68	
In hands of disbursing officers—		
New York City	25,174.00	
Washington, D. C	7,263.29	
St. Louis, Mo	3,484.27	
San Francisco, Cal	7,062.81	
Honolulu, Hawaii	330.38	
Manila, P. I	9,538.99	
		152,056.89
Total accounted for		700,029.39

Medical and hospital department, 1911.

Balances on hand July 1, 1911, act Mar. 23, 1910		$69,061.87
Refundments during the year		40.24
Total to be accounted for		69,102.11
Disbursed during the year:		
Expenses of medical supply depots	$212.58	
Medical and hospital supplies	50,593.13	
Medical attendance and medicines (except at recruiting stations)	4,251.53	
Medical expenses of recruiting	1,034.15	
Pay of nurse	40.00	
Pay of other employees	3,363.03	
Hospital laundry	6,995.40	
Notary fees	3.14	
Expressage	46.55	
Gas and electricity for laboratory apparatus, etc	1,798.28	
Customs duties and internal-revenue taxes on medical supplies	30.92	
Miscellaneous	42.00	
		68,410.71
Transferred by the Treasury Department to correct disbursing errors:		
To "Medical and hospital department, 1910"	90.30	
To "Medical and hospital department, 1912"	1.70	
		92.00
Balance on hand June 30, 1912, in the United States Treasury		599.40
Total accounted for		69,102.11

Medical and hospital department, 1910.

Balance on hand July 1, 1911, act Mar. 3, 1909		$6,044.31
Transfer to this head made by the Treasury Department to correct a disbursing error, from "Medical and hospital department, 1911"		90.30
Total to be accounted for		6,134.61
Disbursed during the year:		
Medical and hospital supplies	$5.00	
Medical attendance and medicines (not at recruiting stations)	15.35	
Gas and electricity for laboratory apparatus, etc	323.85	
		344.20
Carried to surplus fund		5,790.41
Total accounted for		6,134.61

Replacing medical supplies, 1912–13.

(Act June 12, 1906, 34 Stats., 256.)

Amounts accruing to this fund:		
A. On account of supplies transferred—		
To Quartermaster's Department, U. S. Army	$2,929.44	
To Engineer Department, U. S. Army	24.00	
To Isthmian Canal Commission	9,260.96	
To Navy and Marine Corps	7,778.78	
To Interior Department	7.20	
To Bureau of Forestry	465.63	
To Department of Justice	13.50	
To States, for the use of the militia	38,691.07	
		$59,170.58
B. On account of supplies sold—		
To States, for the use of the militaia	1,857.38	
To civil Government, Philippine Islands	158.32	
To United States Soldiers' Home	5,043.07	
To American National Red Cross	826.61	
To civilian employees and civilians	7,974.26	
		15,859.64
C. On account of collections from carriers and others for medical property lost or destroyed	384.64	
Total to be accounted for		75,414.86
Balance on hand June 30, 1912, in United States Treasury		75,414.86

Replacing medical supplies, 1911–12.

Balance on hand July 1, 1911		$66,178.45
Amounts accruing to this fund:		
A. On account of supplies transferred—		
To Quartermaster's Department, U. S. Army	$121.29	
To Engineer Department, U. S. Army	26.50	
To Isthmian Canal Commission	730.48	
To States, for the use of the militia	1,884.23	
		2,762.50
B. On account of supplies sold—		
To States, for the use of the militia	61.60	
To civilian employees and civilians	1,702.58	
		1,764.18
C. On account of collections from carriers and others for medical property lost or destroyed		211.44
Total to be accounted for		70,916.57

Disbursed during the year, for medical and hospital supplies		$53,266.49
Transfer by Treasury Department to "Replacing medical supplies, 1910–11," to correct erroneous deposit		.34
Counter transfer by Treasury Department to the credit of appropriations for the Organized Militia to cover erroneous charge for medical supplies not issued		114.20
Balances on hand June 30, 1912:		
In United States Treasury	$2.03	
In hands of disbursing officer, New York City	17,533.51	
		17,535.54
Total accounted for		70,916.57

Replacing medical supplies, 1910–11.

Balance on hand July 1, 1911		$13,157.24
Amounts accruing to this fund:		
A. On account of collection from carrier for medical property lost or destroyed	$24.22	
B. On account of transfer by the Treasury Department from "Replacing medical supplies, 1911–12," to correct erroneous deposit	.34	
		24.56
Total to be accounted for		13,181.80
Disbursed during the year, for medical and hospital supplies		13,146.21
Balance on hand June 30, 1912, in United States Treasury		35.59
Total accounted for		13,181.80

Replacing medical supplies, 1909–10.

Balance on hand July 1, 1911	$518.36
Carried to surplus fund	518.36

Replacing medical supplies destroyed by fire, 1910–11.

Balance on hand July 1, 1911, act June 25, 1910	$55,483.27
Disbursed during the year for medical and hospital supplies	55,270.09
Balance on hand June 30, 1912, in the hands of disbursing officer, New York City	213.18

Replacing medical supplies destroyed by fire, 1909–10.

Balance on hand July 1, 1911, act Mar. 4, 1909	$1.39
Carried to surplus fund	1.39

Library, Surgeon General's Office, 1912.

Appropriated by act approved Mar. 3, 1911		$10,000.00
Disbursed during the year		6,796.19
Balances on hand June 30, 1912:		
In United States Treasury	$1,456.51	
In hands of disbursing officer, Washington, D. C.	1,747.30	
		3,203.81

Library, Surgeon General's Office, 1911.

Balance on hand July 1, 1911, act Mar. 23, 1910	$2,995.18
Refundment during the year, to correct disbursing error	.04
Total to be accounted for	2,995.22
Disbursed during the year	2,873.89
Balance on hand June 30, 1912, in United States Treasury	121.33

Library, Surgeon General's Office, 1910.

Balance on hand July 1, 1911, act Mar. 3, 1909		$17.10
Carried to surplus fund		17.10

Army Medical Museum, 1912.

Appropriated by act approved Mar. 3, 1911		$5,000.00
Disbursed during the year		3,769.66
Balances on hand June 30, 1912:		
In United States Treasury	$479.79	
In hands of disbursing officer, Washington, D. C.	750.55	
		1,230.34

Army Medical Museum, 1911.

Balance on hand July 1, 1911, act Mar. 23, 1910		$1,926.49
Transfer to this head made by the Treasury Department to correct a disbursing error, from "Army Medical Museum, 1910"		205.33
Total to be accounted for		2,131.82
Disbursed during the year		1,708.02
Balance on hand June 30, 1912, in United States Treasury		423.80

Army Medical Museum, 1910.

Balance on hand July 1, 1911, act Mar. 3, 1909		$485.91
Transfer by the Treasury Department to "Army Medical Museum, 1911," to correct a disbursing error		205.33
Carried to surplus fund		280.58

Artificial limbs, 1912.

Appropriated by act approved Mar. 3, 1911		$330,000.00
Disbursed during the year		291,581.33
Balances on hand June 30, 1912:		
In United States Treasury	$34,186.67	
In hands of disbursing officer, Washington, D. C.	4,232.00	
		38,418.67

Artificial limbs, 1911.

Balance on hand July 1, 1911, act of June 25, 1910		$17,545.60
Disbursed during the year		1,864.19
Balance on hand June 30, 1912, in United States Treasury		15,681.41

Artificial limbs, 1910.

Balance on hand July 1, 1911, act Mar. 4, 1909		$13,149.30
Disbursed during the year		11.96
Carried to surplus fund		13,137.34

Appliances for disabled soldiers, 1912.

Appropriated by act approved Mar. 3, 1911		$2,000.00
Disbursed during the year		903.12
Balances on hand June 30, 1912:		
In United States Treasury	$900.00	
In hands of disbursing officer, Washington, D. C.	196.88	
		1,096.88

Appliances for disabled soldiers, 1911.

Balance on hand July 1, 1911, act June 25, 1910	$1,013.05
Disbursed during the year	67.15
Balance on hand June 30, 1912, in United States Treasury	945.90

Appliances for disabled soldiers, 1910.

Balance on hand July 1, 1911, act Mar. 4, 1909	$788.47
Carried to surplus fund	788.47

Trusses for disabled soldiers, 1912.

Appropriated by act approved Mar. 3, 1911		$5,000.00
Disbursed during the year		2,735.38
Balances on hand June 30, 1912:		
In United States Treasury	$2,100.00	
In hands of disbursing officer, Washington, D. C.	164.62	
		2,264.62

Trusses for disabled soldiers, 1911.

Balance on hand July 1, 1911, act June 25, 1910	$2,796.77
Disbursed during the year	294.47
Balance on hand June 30, 1912, in United States Treasury	2,502.30

Trusses for disabled soldiers, 1910.

Balance on hand July 1, 1911, act Mar. 4, 1909	$2,205.24
Carried to surplus fund	2,205.24

Screening doors, etc., isolating ward, Providence Hospital, Washington, D. C.

Balance on hand July 1, 1911, act June 25, 1910	$65.00
Carried to surplus fund	65.00

General summary of all appropriations.

Balance on hand July 1, 1911	$253,433.00
Appropriated	1,052,000.00
Proceeds of sales, etc., accruing to replacing funds, act June 12, 1906 (34 Stats. 256)	80,177.20
Refundments during the year	67.97
Total to be accounted for	1,385,678.17
Disbursed during the year	1,051,015.56
Transferred by Treasury Department to the appropriations for the Organized Militia to cover erroneous charge for medical supplies not issued	114.20
Carried to the surplus fund	22,803.89
Balances on hand June 30, 1912	311,744.52
Total accounted for	1,385,678.17

VITAL STATISTICS.

The following tables show in detail most of the statistical data upon which the statements in this report are based:

64. Surgical operations performed on American troops.
65. Numerical view of the effect of disease and injury on United States troops serving at home and abroad in the year 1911 compared with the corresponding data for the year 1910, by races.
66. Admissions to sick report, discharges, and deaths in the Army with ratios per 1,000 of mean strength, in which all available data for the period 1901–1910 are placed in comparison with the year 1911.
67. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, year 1911, for officers and total enlisted, of the Army.
68. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for American troops, of the Army, white, colored, and total, for the year 1911.
69. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the year 1911, United States, continental (excluding Alaska), and separately for white and colored troops serving therein.
70. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the year 1911, Alaska, Hawaii, and American troops serving in the Philippine Islands.
71. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, year 1911, for American troops in the Panama Canal Zone and on Army transports.
72. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, year 1911, for native Porto Rican and Filipino troops.
73. Total movement of sick for the United States Army at home compared with that of foreign armies.
74. A comparison of the admission and death rates of the United States Army at home for certain special diseases with those of foreign armies.
75. A comparison of the most important diseases, by divisions, United States.
76. Movement of sick American troops of the Army, by years, 1907–1911.

TABLE NO. 64.—*Surgical operations performed by officers of the Medical Corps or officers and enlisted men of the Army during the calendar year 1911.*

Operation.	Disease or injury.	Number of cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	EYE.										
Enucleation	Gunshot wound of eye	1	1					1			
Do	Fracture bones of orbit	1	1					1			
Do	Wound of cornea and iris	2	2					2			
Do	Choroido-iritis	1	1					1			
Paracentesis	Hypopyon	1	1							1	
Iridectomy over clear cornea	Nebula	1	1							1	
Tuck of internal rectus	Diplopia due to traumatic strabismus.	1	1							1	
Tenotomy external rectus, and tuck of internal rectus.	External strabismus	1	1							1	
Tenotomy internal rectus, and tuck of external oblique.	Internal strabismus	1	1							1	
Advancement of internal rectus.	Alternating strabismus	1		1						1	
Transplantation 7 Excision and suture 5 McReynolds' operation 1	Pterygium	13	13							13	
Dilatation 1 Incision and curetment 2	Dacryocystitis	3	3							2	

TABLE No. 64.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1911*—Continued.

Operation.	Disease or injury.	Number of cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	EYE—continued.										
Incision and drainage	Abscess of lachrymal gland.	1	1								1
Do	Abscess of canthus	1	1								1
Expression	Follicular conjunctivitis	8	8					8			
Do 17 Expression and cauterization 1	Trachoma	18	18				1	17			
Incision and curetment	Chalazion	9	9							7	2
Excision	Meibomian cyst	1	1							1	
Plastic tarsalorrhaphy	Ectropion	1	1							1	
Extraction	Foreign body embedded in cornea.	11	11							11	
	EAR.										
Mastoidotomy exploratory 1 Mastoidotomy curetment and drainage 13	Mastoiditis	14	14				7	7			
Paracentesis 15 Incision of tympanic membrane 27	Otitis media	42	42				2	8		14	18
Curetment	Papilloma external auditory meatus.	1	1								1
Incision and drainage	Phlegmon of tragus	1	1					1			
	NOSE.										
Excision	Epithelioma of nose	1	1							1	
Excision of elliptical section and hemostasis.	Angioma cavernous, tip of nose.	1	1							1	
Refracture and reposition	Deformity following fracture of nose.	2	1	1				2			
Restoration	Saddle nose	1	1							1	
Incision and drainage	Inflammation antrum of Highmore.	1	1							1	
Resection of septum 1 Resection anterior tip middle turbinate 1	Sinusitis	2	2							2	
Cauterization of middle turbinate.	Frontal sinusitis acute	2	2							2	
Turbinectomy of middle turbinate.	Ethmoiditis	1	1							1	
Cauterization	Persistent epistaxis	2			2					2	
Excision of mucous membrane.	Hypertrophic rhinitis	1	1							1	
Turbinectomy 27 Cauterization 12 Snaring posterior tips 2	Hypertrophy of turbinate	41	40	1				1		40	
Excision of deflected portion 4 Submucous resection 61	Deflection of septum	65	64	1						65	
Do 6 Fracture and reposition 1	Deviation of septum	7	7					3		4	
Excision	Exostosis of septum	1	1				1				
Suturing	Perforation of septum	1			1			1			
Removal with snare and forceps.	Polypus	12	12							11	1
Removal with snare	Fibroid tumor inferior turbinate.	1	1							1	
Opened and drained by way of mouth.	Cyst of nostril	1	1								1
Excision with saw	Septal spur	3	3							3	
Adenectomy	Adenoids, post nasal	14	14				1	12		1	
	MOUTH AND PHARYNX.										
Cheiloplasty, Estlander's	Defect of lower lip	1	1					1			
Excision	Epithelioma lower lip	2	2						2		
Do	Sebaceous cyst, angle of mouth.	1	1							1	
Do	Cyst inner surface of lip	1	1							1	

TABLE No. 64.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1911*—Continued.

Operation.	Disease or injury.	Number of cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	THROAT AND PHARYNX—continued.										
Excision of sac	Ranula	1	1							1	
Excision of mass, including left superior maxilla, left great wing of sphenoid, left palate and left malar bones.	Sarcoma alveolar left upper maxillary region.	1				1		1			
Excision of epulis, and extraction of 2″ lower incisor with removal of alveolar process lining socket.	Epulis	1	1					1			
Excision	Calculus, submaxillary gland.	1	1				1				
Incision and drainage 2 Curetment and drainage 1	Submaxillary abscess	3	3					2		1	
Tonsillectomy 2 Incision 34	Peritonsillar abscess	36	36					2		10	24
Tonsillectomy	Tonsillitis	75	75				2	5	3	52	13
Do	Hypertrophy of tonsil	120	120				2	32		77	9
Incision and drainage	Ludwig's angina	1	1					1			
Uvulectomy	Elongated uvula	3	3							2	1
Excision 23 Curetment 1	Adenoids	24	24				11	9		3	1
	NECK AND THORAX.										
Removal of growth and suturing.	Cancer of left submaxillary gland, and lymphatic glands left submaxillary and superior carotid triangles.	1	1					1			
Excision with thermo-cautery.	Epithelioma, neck	1	1					1			
Thyreoidectomy	Goiter	11	11					10	1		
Do	Exophthalmic goiter	1	1					1			
Cleansing and packing	Gunshot wound of chest	1				1					1
Thoracotomy 13 Resection of rib 12 Resection of rib, drainage, and injection of bismuth paste 1 Aspiration 3 Aspiration and injection of formalin 1 Aspiration 3 Paracentesis 8	Empyema (3 tuberculous) Pleurisy (1 tuberculous)	30 11	24 10	2 ...	2 1	[1]2 ...	6 1	13 3	1 ...	9 6	1 1
	ABDOMEN.										
Gastrostomy	Esophageal stricture	1	1					1			
Gastrojejunostomy	Duodenal ulcer	1	1					1			
Laparotomy	Hepatitis, subacute	1		1				1			
Paracentesis	Cirrhosis of the liver	3	3								3
Laparotomy and drainage 10 Laparotomy, exploratory, and resection ninth rib 2 Thoracic route, resection tenth rib 3 Colostomy exploratory infracostal, right, with resection of eighth and ninth ribs 4 Cholecystotomy 4 Cholecystectomy 1 Cholecystostomy 1 Do	Hepatic abscess Cholecystitis Impacted stone, cystic duct.	19 6 3	16 6 3	3 ...	...	...	...	18 5 3	1 ...	...	...
Cholecystectomy, Mayo's	Biliary fistula	1	1					1			

[1] One died of cardiac failure, due to sudden release of intra-thoracic pressure.

TABLE No. 64.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1911*—Continued.

Operation.	Disease or injury.	Number of cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	ABDOMEN—continued.										
Evacuation of appendicial abcess 9 Appendectomy 315	Appendicitis	324	317	2	2	3	10	310	4		
Appendicostomy	Dysentery	1	1					1			
Colostomy	Colitis, amebic	1	1					1			
Abdominal section; freeing of adhesions.	Intestinal and omental adhesions.	1	1				1				
Laparotomy, and freeing of adhesions.	Adhesions following appendicitis.	1	1					1			
Laparotomy and drainage	Peritonitis (1 tuberculous).	2	2					2			
Laparotomy, with multiple incisions of colon.	Acute ileus, post operative.	1	1					1			
Laparotomy, with reduction of strangulated gut and ligation of adhesions. 1 Laparotomy and establishment of fecal fistula 1	Intestinal obstruction	2	1			1		2			
Enterotomy	Distention paralysis, intestinal.	1	1							1	
Excision of tract and suture of small instestine.	Intestinal fistula	2	1		1		2				
Closure of fistula	Fecal fistula	1	1					1			
Laparotomy, removal of diverticulum from small intestine, and repair of gut.	Perforation of intestine, due to typhoid fever.	1	1					1			
Laparotomy, exploratory	Tumor, probably malignant, involving duodenum, mesenteric glands, and sigmoid flexure.	1	1					1			
Do	Suspected carcinoma of pylorus.	1	1					1			
Laparotomy and abdominal flushing.	Carcinomatosis, abdominal.	1	1					1			
Laparotomy	Malignant disease abdominal viscera.	1	1					1			
Laparotomy and drainage	Intra-abdominal abscess	2	1			1		2			
Laparotomy with open drainage.	General sepsis and general septic peritonitis.	1			1			1			
Laparotomy and repair 1 Laparotomy and coaptation with Murphy button 1	Rupture of small intestine	2	1			1		2			
Laparotomy and repair of gut 3 Laparotomy and intestinal anastomosis 1 Laparotomy, exploratory 2	Gunshot wound of abdomen	6	3		1	2	1	5			
Repair of intestine	Incised wound of ascending colon.	1	1					1			
Laparotomy, exploratory	Stab wound of abdomen	1				1		1			
Mayo's operation Do 2	Umbilical hernia	1	1					1			
Repair of abdominal wall 1 Bassini's operation 166 Bassini's modified operation 11 Andrews's operation 10 Ferguson's operation 8 Ferguson's modified operation 6 Halstead's operation 12 Halstead's modified operation 3 Herniotomy, method not stated 2 Bassini's operation 1 Aslett-Baldwin's operation 1 Radical cure 1	Ventral hernia (1 after an appendectomy).	3	3					3			
	Inguinal hernia	218	218				13	196	9		
	Femoral hernia	3	3					3			

TABLE No. 64.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1911*—Continued.

Operation.	Disease or injury.	Number of cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	ABDOMEN—continued.										
Incision into swelling over erector spinae, exploration with finger, curetment and drainage.	Sinus opening into abdomen, middle of erector spinae muscle.	1	1								1
	ANUS AND RECTUM.										
Proctectomy	Sarcoma of rectum	1				1		1			
Incision and drainage 16 Incision and curetment 9 Do	Ischio-rectal abscess	25	25				2	5		13	5
Removal by dissection	Ischio-rectal fistula	3	3					1		2	
Incision and dissection	Ischio-rectal sinus	1	1							1	
Divulsion and incision	Ischio-rectal ulcer	3	3					2		1	
Excision of scar tissue and suture.	Peri-rectal abscess	1	1					1			
Shortening of sphincter	Peri-rectal sinus	1	1							1	
Dilatation and curetment	Prolapse of rectum	3	3				2	1			
Excision and drainage 16 Excision, curetment, and packing 16 Curetment and elastic suture 1 Tract made complete and curetment 1 Tract laid open with cautery 1 Dissection of tract 1 Dilatation 2	Ulcer of rectum	3	3					3			
Dilatation of sphincter	Fistula in ano	38	38				9	22	1	6	
Incision, curetment, and drainage.	Ulcer of anus	1	1					1			
Curetment and suture 1 Dilatation and curetment 2 Excision 1	Abscess of anus, gonorrheal.	1	1					1			
Excision and cautery 2 Clamp and cautery 1 Cautery 6 Clamp and cautery 75 Clamp and suture 15 Excision 15 Excision and suture 34 Excision and cautery 5 Incision and removal of clot 28 Incision and curetment 11 Ligation 5	Fissure of anus	3	3					3			
Ligation and incision 2 Ligation, clamp, and cautery 1 Ligation and excision 66 Allingham's operation 9 Earl's operation 3 Mitchell's operation 6 Pilcher's operation 4 Thewell-Thomas' operation 1 Whitehead's modified operation 2	Verruca acuminata	4	4				1	3			
	Hemorrhoids	288	288				13	203	4	52	16
	GENITO-URINARY SYSTEM.										
Nephrolithotomy 1 Nephrotomy, exploratory 1 Do	Renal calculi	2	2					2			
	Suspected kidney stone	1	1					1			
Laparotomy, exploratory 1 Cystotomy and repair 1 Do	Rupture of bladder	2	1			1		2			
	Laceration of bladder	1				1		1			

TABLE No. 64.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1911*—Continued.

Operation.	Disease or injury.	Number of cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None
	GENITO-URINARY SYSTEM—continued.										
Supra-pubic lithotomy	Vesical calculus	1	1				1				
Orchidectomy	Carcinoma of testicle	1	1				1				
Do	Atrophy of testicle	1	1					1			
Do	Gumma of testicle	1	1					1			
Do	Tuberculosis of testicle	3	3					3			
Do	Undescended testicle	1	1					1			
Do	Chronic orchitis	1	1					1			
Do	Syphilitic orchitis	1	1				1				
Do	Epididymitis	1	1					1			
Excision of stump spermatic cord.	Tuberculosis of spermatic cord.	1	1					1			
Orchotomy	Painful and congested testicle following operation for varicocele.	1	1						1		
High excision of veins 94 Low excision of veins 11 Radical cure, open operation 18 Excision, site not stated 37 Bassini's operation 1	Varicocele	161	161				8	126	4	18	5
Incision and drainage 3 Incision and packing 1 Excision of sac 7 Inversion of sac 4 Tapping 1 Aspiration 2 Andrews's bottle operation 15 Jaboulay's operation 3 Levi's operation 1 Volkmann's operation 1 von Bergmann's operation 2 Winkelman's operation 1 Radical operation 1	Hydrocele	42	42				2	24		13	3
Incision, and removal of clot	Hematocele	1	1					1			
Dissection of testicle	Tumor of testicle	1	1					1			
Incision and drainage	Abcess of testicle	1	1								1
Incision and drainage 4 Epididymectomy 11 Hagner's operation 9	Epididymitis	24	24					23		1	
Fuller's operation	Seminal vesiculitis	2	2					2			
Perineal section and drainage	Abscess of prostate	3	3				1	2			
Urethrotomy	Urethro-perineal abscess	3	3					1		2	
Incision and drainage	Perineal abscess	1	1						1		
Do	Periurethral abscess	8	8					4		3	1
Do	Suburethral abscess	2	2							2	
Plastic repair	Urethral fistula	1	1					1			
Supra-pubic cystotomy and external urethrotomy.	Impassable stricture of urethra.	1	1					1			
Internal urethrotomy 3 External urethrotomy 3 Rapid dilatation 17	Stricture of urethra	23	23				1	6		4	12
Urethrotomy	Foreign body in urethra	1			1			1			
Meatotomy	Stricture of meatus	2	2							2	
Closure, plastic	Hypospadias	1			1			1			
Extirpation of sac	Sebaceous cyst on prepuce	1	1							1	
Circumcision	Elongated prepuce and redundant prepuce 164 Phimosis and paraphimosis 161 Traumatic phimosis 2 Other diseases of prepuce 11	338	338				28	72	32	204	2
Amputation	Elongated scrotum	1	1					1			
Incision and drainage	Abscess of scrotum	3	3					2		1	

TABLE No. 64.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1911*—Continued.

Operation.	Disease or injury.	Number of cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	VASCULAR SYSTEM.										
Matas's operation 1 Incision and ligation 1	Aneurism	2	2					2			
Ligation of artery	Secondary hemorrhage via mouth from branches of facial artery, caused by gunshot wound.	1			1			1			
Ligation of jugular	Incised wound of neck	1	1						1		
Excision 12 Ligation 1 Ligation and excision 7 Ligation and suturing 1 Subcutaneous ligation 1 Keller's operation 4 Schede's operation 5	Varicose veins	31	31				2	23	1	5	
Flushing and draining	Phlebitis	1	1					1			
	NERVOUS SYSTEM.										
Trephining and inspection of brain.	Concussion of brain	1	1					1			
Craniotomy	Intra-cerebral hemorrhage	1				1		1			
Do	Meningeal hemorrhage	1	1					1			
Craniotomy, exploratory	Apoplexy	1			[1]			1			
Dissection and repair	Division of musculo-spiral nerve.	1	1					1			
Transplantation	Dislocation of ulnar nerve	1	1					1			
Neurorrhaphy 2 Popliteal dissection of nerve and repair 1	Severed sciatic nerve	3	2	1				3			
Exposure of sacro-iliac synchondrosis and drainage.	Sciatica	1			1			1			
Removal of suture	Unabsorbed suture used in neurorrhaphy.	1	1					1			
	SKIN AND CELLULAR TISSUE.										
Incision and drainage	Streptococcus infection	5	4	1				3		2	
Incision and curetment	Pyogenic infection	1			1		1				
Multiple incisions	Severe infection	1	1							1	
Incision and curetment 2 Incision and drainage 66 Do 12	Cellulitis	68	65		3		1	14		31	22
Incision and curetment 2 Crucial incision 1 Excision 1	Carbuncle	16	16					4		8	4
Incision and drainage Do 2	Abscess	308	308				7	16		126	159
Incision and curetment 3 Aspiration and injection 1	Tuberculous abscess	6	6							4	2
Incision and drainage 3 Incision and curetment 1	Whitlow	4	4							4	
Curetment 1 Incision and drainage 6 Do 2	Felon	7	7							2	5
Excision 3 Curetment 1	Sinus	6	6					4	1	1	
Excision	Keloid	1	1							1	
Do	Nevus	1	1							1	
Do	Callus	2	2					2		2	
Excision of slough	X-ray burn (old)	2	2								
Abscission	Tattoo	2	2							2	
Clamp and cautery	Verruca acuminata	1	1					1			
Avulsion 4 Excision 122 Partial excision 24 Anger's operation 18 Connell's operation 2 Cotting's operation 25 Keller's operation 4 von Bergmann's operation 35	Ingrowing toe nail	234	233	1			1	10		211	12

[1] No clot found; wound healed by primary union.

TABLE No. 64.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1911*—Continued.

Operation.	Disease or injury.	Number of cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local	None.
	LYMPHATIC GLANDS.										
Extirpation of gland..... 365 Incision and drainage.... 440 Incision and curetment.. 89	Adenitis, inguinal traumatic..... 5 Adenitis, inguinal venereal..... 615 Adenitis, inguinal nonvenereal..... 98 Adenitis, inguinal, nature not stated..... 95 Adenitis, cervical, nature not stated..... 6 Adenitis, axillary, nature not stated..... 3 Adenitis, femoral, nature not stated..... 2 Adenitis, nature and location not stated.. 70	894	894				80	310	3	388	113
Adenectomy..... 3 Incision and drainage..... 1	Adenitis, tuberculous.....	4	4					3			1
	MUSCLES, TENDONS, FASCIÆ, LIGAMENTS, AND BURSÆ.										
Incision and suturing of sheath..... 2 Incision and suturing of muscle bundles..... 2	Rupture of muscle.....	4	4				1	2		1	
Suturing of divided muscle...	Stab wound of thigh.....	1	1					1			
Tenorrhaphy.....	Rupture of ligamentum patellæ.	1	1					1			
Do.....	Severed tendon.....	5	5				1	3			1
Separation of adhesions.....	Adhesions, tendons of wrist and hand.	1		1				1			
Excision of adhering ligaments	Painful stump of finger.....	1	1					1			
Suturing and drainage.....	Lacerated wound with evulsion of skin and fascia from whole of knee joint.	1	1					1			
Removal distal end first metatarsal bone with transplantation of bursal sac..... 1 Incision and curetment.... 2 Excision of bursa..... 2 Excision of bony enlargement..... 3 Atypical resection..... 7 Baker's modified operation. 1 Keller's operation..... 1	Bunion.....	17	17				1	16			
Excision of bursa..... 4 Incision and drainage..... 5 Incision and curetment.... 1 Aspiration..... 3 Excision..... 3	Bursitis..	13	13				1			10	2
Incision and compression.. 1 Incision and drainage..... 1	Ganglion..	3	3					2		2	
Excision.....	Bursa over external malleolus.	1	1							1	
Tenotomy.....	Hammer toe.....	1	1							1	
Do.....	Cicatricial contraction.....	1	1						1		
	BONES.										
Trephining.....	Simple fracture of skull....	1	1					1			
Incision and removal of fragments.	Comminuted fracture of skull.	1	1					1			
Elevation of depressed bone..	Depressed fracture of skull..	3	2			1	1	2			
Trephining.....	Gunshot fracture of skull...	1	1				1				
Incision and drainage.....	Necrosis of frontal bone...	1	1					1			
Removal of fragments.....	Fracture, malar, zygoma, and nasal bones.	1	1					1			

TABLE No. 64.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1911*—Continued.

Operation.	Disease or injury.	Number of cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	BONES—continued.										
Wiring fracture neck inferior maxilla.	Fracture inferior maxilla	1	1					1			
Trephining and curetment, external table.	Osteoma inferior maxilla	1		1				1	1		
Excision of dead bone	Necrosis inferior maxilla	1	1					1			
Removal sharp end of bone. 1 Wiring 2	Fracture of clavicle	3	3					2		1	
Do	Fracture of clavicle ununited	1	1					1			
Do	Fracture of humerus	1		1				1			
Resection	Tuberculosis head of humerus.	1	1					1			
Incision and curetment	Osteomyelitis of humerus	1		1				1			
Exploratory incision	Fracture of radius	1	1					1			
Incision and replacement fragments of ulna in proper position.	Mal-union, compound comminuted fracture radius and ulna.	1	1					1			
Osteotomy	Functional impairment following Colles's fracture.	1	1					1			
Do	Colles's fracture with imtion and mal-union.	1		1				1			
Sequestrotomy and drainage	Ostitis, chronic, with sequestrum following operation for vicious union of Colles's fracture.	1	1					1			
Excision of styloid	Simple fracture of ulna	1	1					1			
Do	Impaired motion of wrist	1	1					1			
Laminectomy	Fracture fourth and fifth cervical vertebræ.	1				1		1			
Do	Fracture fifth and sixth cervical vertebræ.	1	1					1			
Laminectomy exploratory	Fracture of the spine	1			1			1			
Removal of depressed laminæ.	Gunshot fracture fourth and fifth dorsal vertebræ.	1				1		1			
Removal arches last dorsal and first lumbar vertebræ.	Oblique fracture body of first lumbar vertebra.	1	1					1			
Wiring	Compound comminuted fracture of femur.	1	1					1			
Osteotomy	Osteoma of femur	1	1					1			
Removal of necrotic area	Tuberculous necrosis, greater trochanter.	1	1					1			
Wiring	Fracture of patella	1	1					1			
Do	Fracture of patella ununited.	1	1					1			
Removal of fragments and drainage.	Fracture of patella comminuted.	1		1			1				
Refracture of tibia and resection portion of fibula.	Mal-union from fracture of tibia at middle third.	1	1					1			
Wiring of tibia	Compound comminuted fracture of tibia.	1	1					1			
Do	Compound fracture tibia and fibula.	1	1					1			
Applying metal plate to fracture.	Simple comminuted fracture of tibia.	1	1					1			
Applying Lane's bone plate	Ununited fracture of tibia and fibula.	1	1					1			
Incision and removal of silver plate.	Comminuted fracture both bones of leg (old).	1	1					1			
Wiring	Simple fracture of tibia and fibula.	1	1					1			
Vertical incision over tibia, excision of subperiosteal sinus, and scraping of bone.	Compound comminuted fracture tibia and fibula.	1	1					1			
Wiring of bones	do	1			1			1			
Incision and wiring	Simple refracture both bones of leg.	1		1				1			
Portion of fibula removed, and fragments of tibia reunited.	Non-union from complete compound fracture both bones of leg.	1	1					[1			

TABLE No. 64. *Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1911*—Continued.

Operation.	Disease or injury.	Number of cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	BONES—continued.										
Osteotomy	Deformity leg with eversion of foot and stiffness of ankle following fracture both bones of leg.	1	1					1			
Excision of tip	Fracture tip of fibula	1	1					1			
Excision of distal fragment	Ununited fracture of fibula.	1	1					1			
Refracture and wiring	Painful callous following fracture of fibula.	1	1						1		
Osteotomy 1 Osteotomy and curetment 1 Osteotomy exploratory 4 Incision exploratory 1	Osteomyelitis of tibia	7	5		2		1	6			
Removal of cortex and medulla.	Ostitis, chronic, of tibia	1	1					1			
Excision	Osteo-periostitis of tibia	1	1					1			
Do	Osteoma tubercle of tibia	1	1					1			
Removal of necrotic area	Necrosis of tibia	1	1					1			
Removal of spicula of bone	Crushing of foot	1	1					1			
Resection	Necrosis of ankle	1	1					1			
Excision of fragments and reduction.	Fracture-dislocation of finger.	1	1					1			
Do	Fracture of carpal scaphoid.	2	2					2			
Freeing flexor tendons and median nerve from adhesions by dissection, and division of annular ligament.	Old fracture of carpal scaphoid, with resulting tenosynovitis and neuritis of median nerve.	1	1					1			
Removal of spicula	Fracture of metacarpal bone.	1	1					1			
Removal with chisel of callous formation.	do	1	1				1				
Incision and suturing of periosteum.	Fracture of metacarpal, faulty union.	1	1							1	
Incision, freshening ends of fracture, and reposition.	Fracture of metacarpal, recurrent.	1	1				1				
Excision	Exostosis head of metacarpal bone.	1	1					1			
Excision head of metacarpal	Painful stump	1	1					1			
Excision of dead bone	Necrosis terminal phalanx ring finger.	1	1					1			
Do	Necrosis of metatarsal bone.	1	1					1			
Osteotomy	Osteoma	2	2					2			
Do	Exostosis	2	2					1		1	
Excision proximal phalanx second toe.	Old fracture, dislocation	1	1					1			
Incision and drainage	Periostitis	5	5					2		2	1
	JOINTS.										
Arthrotomy 2 Kocher's operation 2	Dislocation of shoulder joint.	4	2	1	1			3	1		
Capsulorrhaphy	Dislocation of shoulder, recurrent.	2	2					2			
Do	Subluxation of shoulder, recurrent.	1	1					1			
Exposing and wiring of joint	Acromio-clavicular dislocation.	1	1					1			
Excision of bony growth	Ankylosis of elbow joint	1	1					1			
Incision and removal of bony fragments.	Loose bodies in elbow joint, result of fracture.	1	1					1			
Freeing of adhesions	Fibrous adhesions elbow and phalangeal joints.	1		1				1			
Laminectomy	Dislocation eleventh dorsal vertebra.	1	1					1			
Aspiration	Arthritis, knee joint	1	1								1
Arthrotomy and excision of villi.	Villous arthritis, knee joint.	3	3					3			
Freeing of adhesions	Fibrous adhesions, knee joint.	1	1					1			

TABLE NO. 64.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1911*—Continued.

Operation.	Disease or injury.	Number of cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	JOINTS—continued.										
Excision of loose cartilage	Detached semilunar cartilage.	9	9					7		2	
Aspiration	Synovitis knee joint	2									
Incision and curetment		1	5	5				3		2	
Incision, exploratory		2									
Arthrectomy	Chronic arthritis	1	1					1			
Excision of exostosis	Hallux valgus	5	11	11				11			
Mayo's operation		5									
May's modified operation		1									
Arthrotomy	Ankylosis finger joint	1	1	1				1			
Incision and drainage	Infected metacarpo-phalangeal joint.	1	1	1				1			
Tenotomy	Hammer toe	2	3	3				1		1	1
Resection head of 1st phalanx		1									
	AMPUTATIONS.										
Amputation arm, upper third	Crushing of arm by cars	1	1	1				1			
Amputation forearm, lower third	Compound comminuted fracture.	1	1	1				1			
Amputation hand	Laceration destroying fingers and thumb.	1	1	1			1				
Amputation, Maingault's modified operation	Amputation of hand by bread mixer.	1	1	1				1			
Amputation thigh, middle third	Incised wound, involving knee joint.	1	1	1				1			
Amputation thigh, junction middle and lower thirds	Incised wound, upper third of leg.	1				[1]1		1			
Do	Crushing of leg	3	2	2		1	1	2			
Amputation leg, middle third	Comminuted fract ureboth bones of leg with severe laceration of soft parts.	1	1	1				1			
Amputation legs, middle third	Compound fracture both bones of both legs.	1				1		1			
Amputation leg, lower third	Lacerated wound of ankle	1				1		1			
Amputation, Chopart's operation	Pyogenic infection of toes, with gangrene of great toe.	1			1			1			
Amputation leg, middle third	do	1	1	1				1			
Amputation finger	Gunshot wound of finger	7	7	7			2	4		1	
Do	Electricity burn	1	1	1							1
Do	Other injury	23	22	22	1		2	14		6	1
Do	Felon	1	1	1				1			
Do	Painful scar	1	1	1						1	
Do	Necrosis	1	1	1						1	
Do	Cause not stated	5	5	5				4		1	
Disarticulation	Corn on stump of toe	1	1	1						1	
Amputation of toe	Hammer toe	16	16	16			1	11		4	
Do	Overlapping toe	3	3	3				2		1	
Do	Underlapping toe	1	1	1						1	
Do	Hyper-extension of toe	2	2	2				2			
Do	Other deformity of toe	1	1	1				1			
Do	Cause not stated	2	2	2				2			
	FOREIGN BODIES.										
Incision and extraction	Lowden ball	17	17	17			2	9		5	1
Do	Bird shot	1	1	1				1			
Do	Fragment of cartridge	1	1	1						1	
Incision, exploratory	Fragment of steel	1			1					1	
Incision and extraction	Other foreign bodies	10	10	10				1		6	3
	TUMORS.										
Excision	Carcinoma	1	1	1				1			
Do	Epithelioma	1	1	1				1			
Do	Sarcoma	1	1	1				1			
Do	Chondroma	1	1	1				1			

[1] Died of tetanus.

TABLE NO. 64.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1911*—Continued.

Operation.	Disease or injury.	Number of cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	TUMORS—continued.										
Excision	Cyst	16	16	...	...	...	...	2	...	14	...
Do	Cystic tumor	1	1	...	...	...	...	...	...	1	...
Do	Dermoid cyst	4	4	...	...	...	1	1	1	1	...
Do	Fibroma	7	7	...	...	...	...	2	...	5	...
Do	Lipoma	11	11	...	...	...	2	1	...	7	1
Amputation of breast	Tumor of breast (gynecomastia).	1	1	...	...	...	...	1	...	...	...
Excision	Tumor, unclassified	2	2	...	...	...	...	1	...	1	...
Do 25 Incision and drainage 10 Incision and curetment 8 Evacuation and injection tincture of iodine 1	Sebaceous cyst	44	44	...	...	...	1	2	...	38	3
	PLASTIC SURGERY.										
Plastic operation	Defect of lower lip after operation.	1	1	...	...	...	...	1	...	...	...
Do	Ulcerated area	1	1	...	...	...	...	...	...	...	1
Do	Lacerated wound	1	...	1	...	...	...	1	...	...	...
Excision and Thiersch's operation.	Ulcer	2	2	...	...	...	...	2	...	...	...
Excision and skin grafting	X-ray ulcer	1	1	...	...	...	...	1	...	...	...
Incision and plastic repair	Cicatrical contracture	3	3	...	...	...	...	2	...	1	...
Excision and plastic operation	Corns	2	2	...	...	...	...	2	...	...	...
	MISCELLANEOUS.										
Suturing	Incised wound	52	52	...	...	...	...	3	...	3	46
Incision and drainage 6 Excision of dead tissue 1 Cleansing and suturing 39	Lacerated wound	46	46	...	...	...	...	6	...	...	40
Incision and drainage 2 Incision and cauterization 1	Punctured wound	3	3	...	...	...	...	...	...	2	1
Exploratory incision 1 Suturing 17	Wounds of scalp	18	18	...	...	...	...	2	...	...	16
Incision and drainage	Infected wounds	16	16	...	...	...	...	2	...	3	11
Excision of sinus over trochanter major and drainage.	Abscess ramifying through muscles of buttock and thigh.	1	1	...	...	...	...	1	...	...	...
Incision and drainage	Psoas abscess	1	1	...	...	...	...	...	...	1	...
Curetment	Sinus of sacrum	1	1	...	...	...	...	...	...	1	...
Dissection of tract and removal of dead bone.	Fistula following gunshot wound.	2	2	...	...	...	...	2	...	...	...
Stitching periosteum of jaw, wiring fracture, and reducing luxation of clavicle.	Compound fracture of jaw and fracture and dislocation of clavicle.	1	1	...	...	...	...	1	...	...	...
Excision of mass	Indurated mass following injection of salvarsan.	1	1	...	...	...	...	...	...	1	...
Excision of necrotic mass	Ulceration and deep necrosis, subcutaneous and muscular tissues mid-scapular region due to intra-muscular administration of salvarsan.	1	1	...	...	...	...	1	...	...	...
Total number of cases		4,403	4,326	26	27	24	248	1,899	74	1,606	576

TABLE NO. 65.—*Numerical view of the effect of disease and injury on United States troops serving at home and abroad, in the year 1911, compared with corresponding data for the year 1910, by races.*

ABSOLUTE NUMBERS.

		Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Noneffective from sickness.	
			Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Days treated.	Constantly noneffective.
White troops	1911	69,746	65,830	54,236	11,594	969	860	109	328	183	145	1,297	1,043	254	855,289	2,343.26
	1910	68,548	65,469	52,938	12,531	970	867	103	298	162	136	1,268	1,029	239	906,909	2,484.68
Colored troops	1911	3,002	2,243	1,739	504	42	37	5	20	11	9	62	48	14	28,357	77.69
	1910	2,986	2,471	1,861	610	37	34	3	22	13	9	59	47	12	31,301	85.76
Porto Rican troops	1911	580	609	562	47	5	4	1	4	2	2	9	6	3	6,304	17.27
	1910	591	563	487	76	9	4	5	.....	.....	.....	9	4	5	6,899	18.90
Filipino troops	1911	5,266	3,922	3,510	412	26	23	3	24	17	7	50	40	10	38,172	104.58
	1910	5,093	4,462	3,809	653	36	32	4	23	19	4	59	51	8	48,342	132.44

PROPORTIONAL NUMBERS.

		Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Constantly noneffective.	Days treated.	
			Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.		Each soldier.	Each case.
White troops	1911	69,746	943.85	777.43	166.23	13.84	12.28	1.56	4.68	2.61	2.07	18.52	14.89	3.63	33.60	12.26	12.99
	1910	68,548	955.08	772.28	182.81	14.09	12.60	1.50	4.33	2.35	1.98	18.42	14.95	3.48	36.25	13.23	13.85
Colored troops	1911	3,002	747.17	579.28	167.89	13.99	12.33	1.66	6.66	3.66	2.99	20.65	15.99	4.65	25.88	9.45	12.64
	1910	2,986	827.53	623.24	204.29	12.39	11.39	1.00	7.37	4.35	3.01	19.76	15.74	4.01	28.72	10.48	12.67
Porto Rican troops	1911	580	1,050.00	968.97	81.03	8.62	6.90	1.72	6.90	3.45	3.45	15.52	10.35	5.17	29.78	10.87	10.35
	1910	591	952.62	824.03	128.60	15.23	6.77	8.46	.....	.....	.....	15.23	6.77	8.46	31.98	11.43	12.20
Filipino troops	1911	5,266	744.78	666.54	78.24	4.94	4.37	.57	4.56	3.23	1.33	9.50	7.60	1.90	19.86	7.25	9.73
	1910	5,093	876.10	747.89	128.22	6.79	6.04	.75	4.34	3.58	.75	11.13	9.62	1.50	26.01	9.49	10.83

TABLE NO. 66.—*Admissions to sick report, discharges, and deaths, with ratios per 1,000 of mean strength, in which all available data for the decade ending Dec. 31, 1910, are placed in comparison with the year 1911.*

	American troops, Army 1901-1910.						American troops, Army 1911.					
Mean strength	S. G. O., 667,452 (mean annual, 66,745). A. G. O., 677,250 (mean annual, 67,725).						S. G. O., 72,748. A. G. O., 73,023.					
Cause of admission to sick report.	Admissions.		Discharges.		Deaths.		Admissions.		Discharges.		Deaths.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Typhoid fever	3,143	4.71	13	0.02	291	0.43	57	0.78	1	0.01	7	0.10
Malarial fevers, total	92,966	139.29	35	.05	146	.22	1,832	25.18	1	.01	1	.01
Intermittent	76,789	115.05	2	.003	3	.004	1,465	20.14			1	.01
Aestivo-autumnal	14,171	21.23			119	.18	341	4.69				
Other malarial diseases	2,006	3.01	33	.05	24	.04	26	.36	1	.01		
Smallpox	340	.51			54	.08	5	.07				
Measles	6,367	9.54	8	.01	71	.10	1,258	17.29			25	.34
Eruptive fevers, others	1,179	1.77			3	.004	132	1.82				
Diphtheria	304	.46			10	.01	46	.63	1	.01		
Influenza	18,530	27.76			6	.01	1,201	16.51				
Asiatic cholera	670	1.00			397	.59						
Cholera nostras	487	.73					1	.01				
Dysentery	18,803	28.17	366	.54	503	.74	302	4.15	4	.05	1	.01
Yellow fever	44	.07			7	.01						
Leprosy	3	.004	2	.003	1	.001						
Beriberi	1,275	1.91	13	.02	60	.09						
Erysipelas	502	.75	1	.001	14	.02	43	.59				
Dengue	18,170	27.22			2	.003	1,453	19.97				
Mumps	7,507	11.25					1,052	14.46				
Cerebrospinal fever, including meningitis	171	.26	20	.03	96	.14	6	.08			6	.08
Purulent infection, and septicemia	124	.19	4	.01	63	.09	4	.05			3	.04
Tuberculosis, all	3,111	4.66	1,841	2.72	439	.65	272	3.74	210	2.88	32	.44
Total, venereal	119,728	179.38	2,015	2.98	32	.05	13,468	185.13	86	1.18	7	.10
Syphilis and its results	18,287	27.40	1,365	2.02	27	.04	3,574	49.13	35	.48	7	.10
Chancroid and its results	22,815	34.18	15	.02			2,561	35.20	1	.01		
Gonorrhea and its results	78,626	117.80	635	.94	5	.01	7,333	100.80	50	.68		
Cancer and other malignant growths	134	.20	28	.04	49	.07	16	.22	2	.03	6	.08
Rheumatism, acute articular	5,255	7.87	18	.03	5	.01	426	5.86				
Rheumatism, subacute and chronic articular	4,086	6.12	301	.44	1	.001	267	3.67	17	.23		
Alcoholism and its results	17,798	26.67	138	.20	127	.19	1,563	21.49	12	.16	6	.08
Insanity	1,067	1.60	913	1.35	6	.01	126	1.73	107	1.47		
Diseases of the brain and spinal cord	721	1.08	245	.36	54	.08	11	.15	6	.08	2	.03
Tetanus	9	.01			7	.01	3	.04			3	.04

TABLE No. 66.—*Admissions to sick report, discharges, and deaths, with ratios per 1,000 of mean strength, in which all available data for the decade ending Dec. 31, 1910, are placed in comparison with the year 1911*—Continued.

Cause of admission to sick report.	American troops, Army 1901–1910.						American troops, Army 1911.					
Mean strength	S. G. O., 667,452 (mean annual, 66,745). A. G. O., 677,250 (mean annual, 67,725).						S. G. O., 72,748. A. G. O., 73,023.					
	Admissions.		Discharges.		Deaths.		Admissions.		Discharges.		Deaths.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Diseases of the heart	3,869	5.80	999	1.48	203	0.30	139	1.91	41	0.56	21	0.29
Varicocele	2,713	4.06	38	.06	.....	.....	273	3.75	1	.01	.....	.....
Adenitis, nonvenereal	4,273	6.40	3	.004	.....	.....	415	5.70	.....	.....	.....	.....
Lymphangitis	489	.73	5	.01	.....	.....	17	.23	.....	.....	.....	.....
Coryza and other diseases of the nasal fossæ	11,402	17.08	59	.09	.....	.....	1,167	16.04	1	.01	.....	.....
Bronchitis, acute and chronic	31,353	46.97	51	.08	8	.01	2,329	32.01	3	.04	.....	.....
Pneumonia, all	2,027	3.04	6	.01	296	.44	161	2.21	.....	.....	26	.36
Pleurisy	2,065	3.09	62	.09	21	.03	195	2.68	5	.07	3	.04
Tonsilitis and other diseases of the pharynx	42,036	62.98	2	.003	3	.004	4,450	61.17	.....	.....	.....	.....
Gastritis	12,349	18.50	63	.09	13	.02	658	9.05	4	.05	.....	.....
Diarrhea and enteritis	71,074	106.49	90	.13	76	.11	2,186	30.05	2	.03	.....	.....
Peritonitis (simple)	73	.11	5	.01	38	.06	3	.04	.....	.....	.....	.....
Hernia	2,971	4.45	482	.71	3	.004	306	4.21	23	.32	.....	.....
Appendicitis	2,782	4.17	54	.08	88	.13	453	6.23	5	.07	6	.08
Diseases of the kidneys	1,576	2.36	156	.23	153	.23	121	1.66	10	.14	13	.18
Periostitis	642	.96	26	.04	1	.001	46	.63	2	.03	.....	.....
Arthritis and synovitis	3,377	5.06	176	.26	.....	.....	253	3.48	8	.11	.....	.....
All other diseases	241,893	362.41	4,350	6.42	331	.49	19,259	264.74	345	4.72	26	.36
Total for diseases	759,458	1,137.84	12,588	18.59	3,678	5.43	55,975	769.44	897	12.28	194	2.66
Total for injuries	142,359	213.29	1,519	2.24	1,866	2.76	12,098	166.30	114	1.56	154	2.11
Grand total	901,817	1,351.13	14,107	20.83	5,544	8.19	68,073	935.74	1,011	13.85	348	4.77

TABLE NO. 67.—*Admissions to sick report, discharges, deaths, and noneffectiveness with ratios per 1,000 of mean strength, for the Army—officers and total enlisted men, for the year 1911.*

Causes of admission to sick report.	Officers, Army.								American troops, Army.							
Mean strength	S. G. O., 4,225—A. G. O., 4,515.								S. G. O., 72,748—A. G. O., 73,023.							
	Admissions.		Retirement for disability.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Typhoid fever	1	0.24					1.36	.32	[1] 57	.78	1	0.01	7	0.10	13.67	0.19
Paratyphoid fever									2	.03					.24	.003
Fevers, undetermined	4	.95					.17	.04	245	3.37					5.10	.07
Malaria	98	23.20			1	.22	2.50	.59	1,832	25.18	1	.01	1	.01	42.95	.59
Quartan									32	.44					.64	.01
Tertian	63	14.91					1.16	.27	1,433	19.70			1	.01	30.36	.42
Aestivo-autumnal	24	5.68			1	.22	.74	.17	341	4.69					10.59	.15
Malarial cachexia	10	2.37					.59	.14	18	.25	1	.01			1.21	.02
Undetermined malarial infection	1	.24					.01	.003	8	.11					.15	.002
Hemoglobinuric fever									1	.01					.03	.0004
Smallpox									5	.07					.52	.01
Measles	6	1.42					.26	.06	1,258	17.29			25	.34	63.98	.88
Scarlet fever									7	.10					.79	.01
Diphtheria	6	1.42					.21	.05	46	.63	1	.01			2.75	.04
Influenza	179	42.37					2.95	.70	1,201	16.51					18.49	.25
Cholera nostras									1	.01					.06	.001
Dysentery	25	5.92	1	.22			1.53	.36	302	4.15	4	.05	1	.01	19.57	.27
Amebic	15	3.55					1.33	.31	192	2.64	4	.05			14.61	.20
Bacillary	2	.47					.10	.02	29	.40			1	.01	1.48	.02
Mixed infections and other dysenteries	8	1.89	1	.22			.10	.02	81	1.11					3.48	.05
Erysipelas	1	.24					.06	.01	43	.59					2.16	.03
Dengue	65	15.38					1.22	.29	1,453	19.97					25.01	.34
Mumps	3	.71					.12	.03	1,052	14.46					46.86	.64
Cerebrospinal meningitis, epidemic									4	.05			3	.04	.35	.005
Vaccinia	2	.47					.01	.001	1,580	21.72					16.91	.23
Purulent infection and septicemia									4	.05			3	.04	.10	.001
Tuberculosis, all	12	2.84	4	.89	1	.22	14.06	3.33	272	3.74	210	2.88	32	.44	98.47	1.35
Tuberculosis, pulmonary	9	2.13	4	.89			11.96	2.83	228	3.13	193	2.71	21	.29	89.55	1.23
Tuberculosis of other organs	3	.71			1	.22	2.09	.49	44	.60	17	.23	11	.15	8.92	.12
Venereal diseases, all	43	10.18	1	.22			3.94	.93	13,468	185.13	86	1.18	7	.10	737.91	10.14
Syphilis and its results	17	4.02	1	.22			2.15	.51	3,574	49.13	35	.48	7	.10	218.66	3.01
Chancroid and its results	1	.24					.07	.02	2,561	35.20	1	.01			139.56	1.92
Gonorrhea and its results	25	5.92					1.72	.41	7,333	100.80	50	.68			379.68	5.22

[1] Recent communication changes one case of typhoid fever at Ludlow Barracks, P. I., to aestivo-autumnal fever, thus reducing the number in the army to 56, ratio 0.77.

TABLE NO. 67.—*Admissions to sick report, discharges, deaths, and noneffectiveness with ratios per 1,000 of mean strength, for the Army—officers and total enlisted men, for the year 1911*—Continued.

	Officers, Army.								American troops, Army.							
Mean strength	S. G. O., 4,225—A. G. O., 4,515.								S. G. O., 72,748—A. G. O., 73,023.							
Causes of admission to sick report.	Admissions.		Retirement for disability.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Cancer and other malignant growths									16	0.22	2	0.03	6	0.08	3.02	0.04
Tumors, nonmalignant	5	1.18					0.15	0.03	102	1.40					2.90	.04
Rheumatism, articular, all	26	6.15					1.68	.40	693	9.53	17	.23			48.54	.67
Rheumatic fever, all	16	3.79					.58	.14	426	5.86					24.79	.34
Rheumatism, subacute and chronic, articular	10	2.37					1.10	.26	267	3.67	17	.23			23.75	.33
Alcoholism and its results	23	5.44					.94	.22	1,563	21.49	12	.16	6	.08	22.45	.31
Insanity	3	.71	5	1.11			.28	.07	126	1.73	107	1.46			30.88	.42
Epilepsy	3	.71					.50	.12	126	1.73	26	.36			9.63	.13
Tetanus									3	.04			3	.04	.03	.0004
Trachoma	3	.71					.12	.03	27	.37	3	.04			1.55	.02
Organic diseases of the heart	8	1.89	4	.89	1	0.22	.93	.22	136	1.86	41	.56	21	.29	13.26	.18
Aneurism									3	.04	3	.04	7	.10	.87	.01
Functional diseases of the heart	5	1.18					.15	.04	94	1.29	6	.08			5.86	.08
Bronchitis, acute and chronic	169	40.00					2.44	.58	2,329	32.01	3	.04			46.98	.65
Broncho-pneumonia									34	.47			6	.08	3.27	.04
Pneumonia	5	1.18			1	.22	.39	.09	127	1.75			20	.27	12.04	.17
Diarrhea and enteritis	171	40.47	1	.22			3.35	.79	2,186	30.05	2	.03			30.90	.42
Intestinal parasites	12	2.84					.54	.13	261	3.59					6.52	.10
Tenia saginata	5	1.18					.13	.03	65	.89					1.03	.01
Tenia solium									23	.32					.44	.01
Hymenolepis nana									1	.01					.03	.0004
Bothriocephalus latus									1	.01					.01	.0001
Ascaris lumbricoides	4	.95					.21	.05	28	.38					.91	.01
Oxyuris vermicularis									1	.01					.01	.0001
Ankylostoma duodenale	2	.47					.10	.02	14	.19					.56	.01
Necator americanus	1	.24					.10	.02	125	1.72					3.50	.05
Trichocephalus trichuris									1	.01					.01	.0001
Other intestinal parasites									2	.03					.02	.0003
Hernia	20	4.73	1	.22			2.59	.61	306	4.20	23	.32			29.16	.40
Hepatic abscess									13	.18	6	.08	2	.03	6.55	.09
Appendicitis	59	13.96			1	.22	5.09	1.20	453	6.23	5	.07	6	.08	33.97	.47
Climatic bubo									10	.14					.49	.01
Tropical ulcer									4	.05					.18	.002
Sarcopsillasis (chiggers)									5	.07					.19	.003

Pemphigus contagiosus							.07	.02	10	.14					.29	.004
Dhobie itch	4	.95					.03	.01	155	2.13					3.80	.05
Tinea imbricata									3	.04					.14	.002
Prickly heat									36	.49					.52	.01
Ground itch									1	.01					.08	.001
Acute nephritis	4	.95			1	.22	.32	.08	22	.30	1	.01	4	.05	2.19	.03
Chronic nephritis	13	3.08	4	.89	5	1.11	2.43	.58	43	.59	8	.11	7	.10	6.70	.09
Pyelitis and pyelonephritis	1	.24					.01	.003	12	.16					1.76	.02
Malingering									41	.56					.91	.01
EXTERNAL CAUSES, SPECIAL.																
Fractures	44	10.41			2	.44	5.38	1.27	816	11.22	40	.54	21	.29	94.85	1.31
Dislocations	9	2.13					.67	.16	213	2.93	4	.05	1	.01	9.01	.12
Sprains and muscular strains	105	24.85					3.57	.85	3,274	45.00	4	.05			66.86	.92
Wounds, gunshot	3	.71			2	.44	.41	.10	149	2.05	15	.21	52	.71	17.25	.24
Wounds other than gunshot	33	7.81			1	.22	1.90	.45	2,586	35.55	14	.19	10	.14	63.38	.87
Sunstroke									11	.15					.20	.003
Frostbite and general freezing					1	.22			59	.81	1	.01			1.79	.02
Drowning													24	.33		
Poisoning, acute	16	3.79			2	.44	.28	.07	295	4.05			9	.12	3.61	.05
Venomous bites, etc	6	1.42					.06	.01	93	1.28					2.33	.03
Snake bite									2	.03					.02	.0003
Other venomous bites, etc	6	1.42					.06	.01	91	1.25					2.31	.03
DISEASES AND INJURIES GROUPED.																
General diseases	676	160.00	7	1.55	2	.44	34.28	8.11	30,112	413.92	353	4.83	99	1.36	1,249.20	17.17
Infectious diseases	557	131.83	1	.22	1	.22	12.64	2.99	13,899	191.06	7	.10	37	.51	322.60	4.43
Other general diseases	119	28.17	6	1.33	1	.22	21.64	5.12	16,213	222.87	346	4.74	62	.85	926.60	12.74
Diseases of the nervous system and organs of special sense	224	53.02	10	2.21	1	.22	15.80	3.74	2,428	33.38	238	3.25	6	.08	143.37	1.97
Of the nervous system	128	30.30	7	1.55	1	.22	11.15	2.64	1,056	14.52	198	2.71	6	.08	87.32	1.20
Of the eye and its adnexa	65	15.38					2.96	.70	797	10.96	17	.23			29.55	.41
Of the ear and its adnexa	31	7.34	3	.66			1.68	.40	575	7.90	23	.31			26.50	.36
Diseases of the circulatory system	61	14.44	4	.89	1	.22	3.70	.87	1,574	21.64	55	.75	29	.40	83.21	1.14
Diseases of the respiratory system	339	80.24	1	.22	1	.22	6.90	1.63	4,250	58.42	19	.26	30	.41	107.21	1.47
Diseases of the digestive system	569	134.67	3	.66	1	.22	18.45	4.37	8,743	120.18	51	.70	16	.22	207.34	2.85
Diseases of the genito-urinary system	51	12.07	4	.89	6	1.33	4.94	1.17	931	12.80	37	.51	13	.18	42.89	.59
Diseases of the skin and cellular tissue	108	25.56					3.39	.80	5,201	71.49	10	.14			120.19	1.65
Diseases of the organs of locomotion	95	22.49					4.37	1.03	1,874	25.76	29	.40			61.73	.85
Malformations, etc									209	2.87	104	1.42			19.40	.27
Diseases results of old age											1	.01			.02	.0002
Ill-defined diseases	34	8.05					2.42	.57	653	8.98			1	.01	19.02	.26
Total for disease	2,157	510.53	29	6.42	12	2.66	94.25	22.31	55,975	769.44	897	12.28	194	2.66	2,053.58	28.23
External causes	365	86.39	1	.22	8	1.77	19.45	4.60	12,098	166.30	114	1.56	154	2.11	367.37	5.05
Total for disease and external causes	2,522	596.92	30	6.64	20	4.43	113.70	26.91	68,073	935.74	1,011	13.85	348	4.77	2,420.95	33.28
Subclassification (repeated above):																
Suicide					2	.44							46	.62		
Homicide					1	.22							18	.24		
Killed in action					1	.22							4	.05		
Wounded in action	1	.24							9	.13						

TABLE NO. 68.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the enlisted men of the Army for the year 1911.*

Causes of admission to sick report.	American troops, total enlisted.								Army, white enlisted.								Army, colored enlisted.							
Mean strength	S. G. O., 72,748—A. G. O., 73,023.								S. G. O., 69,746—A. G. O., 70,021.								S. G. O., 3,002—A. G. O., 3,002.							
	Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Typhoid fever	57	0.78	1	0.01	7	0.10	13.67	0.19	56	0.80	1	0.01	6	0.09	13.50	0.19	1	0.3			1	0.33	0.17	0.06
Paratyphoid fever	2	.03					.24	.003	2	.03					.24	.003								
Fevers, undetermined	245	3.37					5.10	.07	240	3.44					5.01	.07	5	1.67					.10	.03
Malaria	1,832	25.18	1	.01	1	.01	42.95	.59	1,830	26.24	1	.01	1	.01	42.92	.62	2	.67					.03	.01
Quartan	32	.44					.64	.01	32	.46					.64	.01								
Tertian	1,433	19.70			1	.01	30.36	.42	1,431	20.52			1	.01	30.33	.43	2	.67					.03	.01
Aestivo-autumnal	341	4.69	1	.01			10.59	.15	341	4.89					10.59	.15								
Malarial cachexia	18	.25	1	.01			1.21	.02	18	.26	1	.01			1.21	.02								
Undetermined malarial infection	8	.11					.15	.002	8	.11					.15	.002								
Hemoglobinuric fever	1	.01					.03	.0004	1	.01					.03	.0004								
Smallpox	5	.07					.52	.01	5	.07					.52	.01								
Measles	1,258	17.29			25	.34	63.98	.88	1,252	17.95			25	.36	63.75	.91	6	2.00					.23	.08
Scarlet fever	7	.10					.79	.01	7	.10					.79	.01								
Diphtheria	46	.63	1	.01			2.75	.04	44	.63	1	.01			2.67	.04	2	.67					.08	.03
Influenza	1,201	16.51					18.49	.25	1,188	17.03					18.33	.26	13	4.33					.17	.06
Cholera nostras	1	.01					.06	.001	1	.01					.06	.001								
Dysentery	302	4.15	4	.05	1	.01	19.57	.27	298	4.27	4	.06	1	.01	19.25	.28	4	1.33					.32	.11
Amebic	192	2.64	4	.05			14.61	.20	190	2.72	4	.06			14.47	.21	2	.67					.14	.05
Bacillary	29	.40			1	.01	1.48	.02	29	.42			1	.01	1.48	.02								
Mixed infections and other dysenteries	81	1.11					3.48	.05	79	1.13					3.30	.05	2	.67					.18	.06
Erysipelas	43	.59					2.16	.03	41	.59					2.08	.03	2	.67					.08	.03
Dengue	1,453	19.97					25.01	.34	1,453	20.83					25.01	.36								
Mumps	1,052	14.46					46.86	.64	1,044	14.97					46.56	.67	8	2.66					.30	.10
Cerebrospinal meningitis, epidemic	4	.05			3	.04	.35	.005	4	.06			3	.04	.35	.005								
Vaccinia	1,580	21.72					16.91	.23	1,556	22.31					16.61	.24	24	7.99					.30	.10
Purulent infection and septicemia	4	.05			3	.04	.10	.001	4	.06			3	.04	.10	.001								
Tuberculosis, all	272	3.74	210	2.88	32	.44	98.47	1.35	256	3.67	202	2.88	30	.43	95.03	1.36	16	5.33	8	2.66	2	.67	3.44	1.14

Tuberculosis, pulmonary	**228**	**3.13**	**193**	**2.71**	**21**	**.29**	**89.55**	**1.23**	**218**	**3.13**	**187**	**2.67**	**19**	**.27**	**87.36**	**1.25**	**10**	**3.33**	**6**	**2.00**	**2**	**.67**	**2.19**	**.73**
Tuberculosis of other organs	44	.60	17	.23	11	.15	8.92	.12	38	.54	15	.21	11	.16	7.67	.10	6	2.00	2	.67			1.25	.42
Venereal diseases, all	13,468	185.13	86	1.18	7	.10	737.91	10.14	13,048	187.08	82	1.17	7	.10	716.52	10.27	420	139.91	4	1.33			21.39	7.12
Syphilis and its results	3,574	49.13	35	.48	7	.10	218.66	3.01	3,498	50.15	31	.44	7	.10	211.90	3.04	76	25.32	4	1.33			6.76	2.25
Chancroid and its results	2,561	35.20	1	.01			139.56	1.92	2,497	35.80	1	.01			136.48	1.96	64	21.32					3.08	1.03
Gonorrhea and its results	7,333	100.80	50	.68			379.68	5.22	7,053	101.12	50	.71			368.14	5.28	280	93.27					11.55	3.85
Cancer and other malignant growths	16	.22	2	.03	6	.08	3.02	.04	16	.23	2	.03	6	.09	3.02	.04								
Tumors, malignant	102	1.40					2.90	.04	98	1.41					2.80	.04	4	1.33					.10	.03
Rheumatism, articular, all	693	9.53	17	.23			48.54	.67	654	9.38	15	.21			46.66	.67	39	12.99	2	.67			1.88	.63
Rheumatic fever	426	5.86					24.79	.34	408	5.85					23.57	.34	18	6.00					1.21	.40
Rheumatism, subacute and chronic, articular	267	3.67	17	.23			23.75	.33	246	3.53	15	.21			23.09	.33	21	7.00	2	.67			.67	.22
Alcoholism and its results	1,563	21.49	12	.16	6	.08	22.45	.31	1,538	22.05	12	.17	6	.09	22.20	.32	25	8.33					.25	.08
Insanity	126	1.73	107	1.46			30.88	.42	118	1.69	105	1.52			29.81	.42	8	2.66	2	.67			1.06	.36
Epilepsy	126	1.73	26	.36			9.63	.13	122	1.75	25	.36			9.41	.13	4	1.33	1	.33			.22	.07
Tetanus	3	.04			3	.04	.03	.0004	3	.04			3	.04	.03	.0004								
Trachoma	27	.37	3	.04			1.55	.02	27	.39	3	.04			1.55	.02								
Organic diseases of the heart	136	1.86	41	.56	21	.29	13.26	.18	126	1.80	37	.53	16	.23	12.19	.17	10	3.33	4	1.33	4	1.33	1.06	.35
Aneurism	3	.04	3	.04	7	.10	.87	.01	3	.04	3	.04	6	.09	.87	.01					1	.33		
Functional diseases of the heart	94	1.29	6	.08			5.86	.08	90	1.29	6	.09			5.79	.08	4	1.33					.06	.02
Bronchitis	2,329	32.01	3	.04			46.98	.65	2,208	31.65	2	.03			44.83	.64	121	40.31	1	.33			2.15	.72
Broncho-pneumonia	34	.47			6	.08	3.27	.04	30	.43			5	.07	3.04	.04	4	1.33			1	.33	.24	.08
Pneumonia	127	1.75			20	.27	12.04	.17	124	1.78			20	.29	11.90	.17	3	1.00					.14	.05
Diarrhea and enteritis	2,186	30.05	2	.03			30.90	.42	2,118	30.37	2	.03			29.73	.43	68	22.65					1.17	.39
Intestinal parasites	261	3.59					6.52	.10	261	3.74					6.52	.09								
Tenia saginata	65	.89					1.03	.01	65	.93					1.02	.01								
Tenia solium	23	.32					.44	.01	23	.33					.44	.01								
Hymenolepis nana	1	.01					.03	.0004	1	.01					.03	.0004								
Bothriocephalus latus	1	.01					.01	.0001	1	.01					.01	.0001								
Ascaris lumbricoides	28	.38					.91	.01	28	.40					.91	.01								
Oxyuris vermicularis	1	.01					.01	.0001	1	.01					.01	.0001								
Ankylostoma duodenale	14	.19					.56	.01	14	.20					.56	.01								
Necator americanus	125	1.72					3.50	.05	125	1.79					3.50	05								
Trichocephalus trichuris	1	01					.01	.0001	1	.01					01	.0001								
Other intestinal parasites	2	03					.02	.0003	2	03					.02	.0004								
Hernia	306	4.20	23	.32			29.16	.40	299	4.28	23	.33			28.53	.41	7	2.33					.63	.21
Hepatic abscess	13	.18	6	.08	2	.03	6.55	.09	10	.14	5	.07	2	.03	5.55	.08	3	1.00	1	.33			1.01	.33
Appendicitis	453	6.23	5	.07	6	.08	33.97	.47	437	6.27	5	.07	5	.07	33.20	.48	16	5.33			1	.33	.76	.25
Climatic bubo	10	.14					.49	.01	10	.14					.49	.01								
Tropica ulcer	4	.05					.18	.002	4	.06					.18	.003								
Sarcopsiliasis (chiggers)	5	.07					.19	.003	5	.07					.19	.003								
Pemphigus contagiosus	10	.14					.29	.004	10	.14					29	.004								
Dhobie itch	155	2.13					3.80	.05	148	2.12					3.49	05	7	2 33					.31	10
Tinea imbricata	3	.04					.14	.002	3	.04					.14	.002								
Prickly heat	36	.49					.52	.01	36	.52					.52	. 01								
Mycetoma																								
Ground itch	1	.01					.08	.001	1	.01					.08	.001								
Acute nephritis	22	.30	1	.01	4	.05	2.19	.03	21	.30	1	.01	4	.06	2.14	.03	1	.33					.05	.02
Chronic nephritis	43	.59	8	.11	7	.10	6.70	.09	41	.59	7	.10	7	.10	6.38	.09	2	.67	1	.33			.32	.10
Cystitis and pyelonephritis	12	.16					1.76	.02	11	.16					1.73	.02	1	.33					.02	.01
Malingering	41	.56					.91	.01	36	.52					.86	.01	5	1.67					.05	.02

TABLE No. 68.—*Admissions to sick report, discharges, deaths, and noneffectiveness with ratios per 1,000 of mean strength, for the enlisted men of the Army for the year 1911*—Continued.

Causes of admission to sick report.	American troops, total enlisted.								Army, white enlisted.								Army, colored enlisted.							
Mean strength	S. G. O., 72,748—A. G. O., 73,023.								S. G. O., 69,746—A. G. O., 70,021.								S. G. O., 3,002—A. G. O., 3,002.							
	Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
EXTERNAL CAUSES, SPECIAL.																								
Fractures	816	11.22	40	0.54	21	0.29	94.85	1.31	788	11.29	38	0.54	21	0.30	91.59	1.31	28	9.33	2	0.67			3.26	1.08
Dislocations	213	2.93	4	.05	1	.01	9.01	.12	200	2.87	4	.06	1	.01	8.35	.12	13	4.33					.66	.22
Sprains and muscular strains	3,274	45.00	4	.05			66.86	.92	3,125	44.80	4	.06			63.83	.92	149	49.63					3.03	1.01
Wounds, gunshot	149	2.05	15	.21	52	.71	17.25	.24	138	1.98	14	.20	47	.67	15.47	.22	11	3.66	1	.33	5	1.67	1.79	.60
Wounds other than gunshot	2,586	35.55	14	.19	10	.14	63.38	.87	2,486	35.65	14	.20	10	.14	60.77	.88	100	33.31					2.60	.87
Sunstroke	11	.15					.20	.003	11	.16					.20	.003								
Frostbite and general freezing	59	.81	1	.01			1.79	.02	47	.67	1	.01			1.55	.02	12	4.00					.24	.08
Drowning					24	.33							23	.33							1	.33		
Poisoning, acute	295	4.05			9	.12	3.61	.05	292	4.19			9	.13	3.57	.05	3	1.00					.04	.01
Venomous bites, etc	93	1.28					2.33	.03	87	1.25					1.93	.03	6	2.00					.40	.13
Snake bite	2	.03					.02	.0003	2	.03					.02	.0003								
Other venomous bites, etc	91	1.25					2.31	.03	85	1.22					1.91	.03	6	2.00					.40	.13
DISEASES AND INJURIES GROUPED.																								
General diseases	30,112	413.92	353	4.83	99	1.36	1,249.20	17.17	29,337	420.63	338	4.83	96	1.37	1,217.57	17.45	775	258.16	15	5.00	3	1.00	31.63	10.54
Infectious diseases	13,899	191.06	7	.10	37	.51	322.60	4.43	13,629	195.41	7	.10	36	.51	318.13	4.56	270	89.94			1	.33	4.47	1.49
Other general diseases	16,213	222.87	346	4.74	62	.85	926.60	12.74	15,708	225.22	331	4.73	60	.86	899.44	12.90	505	168.22	15	5.00	2	.67	27.15	9.05
Diseases of the nervous system and organs of special sense	2,428	33.38	238	3.25	6	.08	143.37	1.97	2,343	33.59	234	3.36	6	.09	140.05	2.01	85	28.31	4	1.33			3.32	1.10
Of the nervous system	1,056	14.52	198	2.71	6	.08	87.32	1.20	1,001	14.35	195	2.80	6	.09	85.18	1.22	55	18.32	3	1.00			2.14	.71
Of the eye and its adnexa	797	10.96	17	.23			29.55	.41	770	11.04	16	.23			28.41	.41	27	8.99	1	.33			1.14	.38
Of the ear and its adnexa	575	7.90	23	.31			26.50	.36	572	8.20	23	.33			26.46	.38	3	1.00					.04	.01
Diseases of the circulatory system	1,574	21.64	55	.75	29	.40	83.21	1.14	1,497	21.46	51	.73	24	.34	79.64	1.14	77	25.65	4	1.33	5	1.67	3.57	1.19
Diseases of the respiratory system	4,250	58.42	19	.26	30	.41	107.21	1.47	4,046	58.01	17	.24	29	.41	102.35	1.47	204	67.95	2	.67	1	.33	4.87	1.62
Diseases of the digestive system	8,743	120.18	51	.70	16	.22	207.34	2.85	8,438	120.98	49	.70	14	.20	199.51	2.86	305	101.60	2	.67	2	.67	7.83	2.61
Diseases of the genito-urinary system	931	12.80	37	.51	13	.18	42.89	.59	877	12.57	32	.46	13	.19	40.44	.58	54	17.99	5	1.67			2.46	.82

Diseases of the skin and cellular tissue	5,201	71.49	10	.14	....	....	120.19	1.65	5,115	73.34	10	.14	....	....	117.82	1.69	86	28.65	....	....	....	....	2.38	.79
Diseases of the organs of locomotion	1,874	25.76	29	.40	....	....	61.73	.85	1,757	25.19	28	.40	....	....	58.47	.84	117	38.97	1	.33	....	....	3.25	1.08
Malformations, etc	209	2.87	104	1.42	....	....	19.40	.27	206	2.95	100	1.43	....	....	18.92	.27	3	1.00	4	1.33	....	....	.48	.16
Diseases, results of old age	....	....	1	.01	....	....	.02	.0002	....	....	1	.01	....	....	.02	.0002	....	....	....	....	....	....	....	....
Ill-defined diseases	653	8.98	....	....	1	.01	19.02	.26	620	8.89	....	....	1	.01	18.27	.26	33	10.99	....	....	....	....	.76	.25
Total for disease	55,975	769.44	897	12.28	194	2.66	2,053.58	28.23	54,236	777.62	860	12.28	183	2.61	1,993.04	28.57	1,739	579.28	37	12.33	11	3.66	60.54	20.17
External causes	12,098	166.30	114	1.56	154	2.11	367.37	5.05	11,594	166.23	109	1.56	145	2.07	350.22	5.02	504	167.89	5	1.67	9	3.00	17.15	5.71
Total for disease and external causes	68,073	935.74	1,011	13.85	348	4.77	2,420.95	33.28	65,830	943.85	969	13.84	328	4.68	2,343.26	33.60	2,243	747.17	42	13.99	20	6.66	77.69	25.88
Subclassification (repeated above):																								
Suicide	....	....	....	....	46	.62	....	....	....	....	....	....	44	.63	....	....	....	....	....	....	2	.67	....	....
Homicide	....	....	....	....	18	.25	....	....	....	....	....	....	16	.23	....	....	....	....	....	....	2	.67	....	....
Killed in action	....	....	....	....	4	.05	....	....	....	....	....	....	4	.06	....	....	....	....	....	....	....	....	....	....
Wounded in action	9	.13	....	....	....	....	....	....	9	.13	....	....	....	....	....	....	....	....	....	....	....	....	....	....

TABLE NO. 69.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the United States, continental (excluding Alaska), for the year 1911, American troops, enlisted men.*

Causes of admission to sick report.	United States, continental, excluding Alaska, total.									United States, continental, excluding Alaska, white.									United States, continental, excluding Alaska, colored.								
Mean strength	S. G. O., 55,240—A. G. O., 55,515.									S. G. O., 52,307—A. G. O., 52,582.									S. G. O., 2,933—A. G. O., 2,933.								
	Admissions.		Discharges.			Deaths.			Noneffective.	Admissions.		Discharges.			Deaths.			Noneffective.	Admissions.		Discharges.			Deaths.			Noneffective.	
	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.
			1.	2.		1.	2.						1.	2.		1.	2.						1.	2.				
Typhoid fever	44	0.80	1	1	0.02	7	6	0.11	11.19	0.20	43	0.82	1	1	0.02	6	6	0.11	11.02	0.21	1	0.34				1	1	0.34	0.17	0.06
Paratyphoid fever	1	.02							.16	.003	1	.02							.16	.003										
Fevers, undetermined	138	2.50							2.59	.05	133	2.54							2.50	.05	5	1.70							.09	.03
Malaria	811	14.68	1	0					19.08	.35	809	15.47	1	0	.02				19.05	.36	2	.68							.02	.01
Quartan	13	.24							.30	.01	13	.25							.30	.01										
Tertian	740	13.40							15.75	.29	738	14.11							15.73	.30	2	.68							.02	.01
Aestivo-autumnal	49	.89							2.13	.04	49	.94							2.13	.04										
Malarial cachexia	7	.13	1	0					.86	.02	7	.13	1	0					.86	.02										
Undetermined malarial infection	2	.04							.02	.0003	2	.04							.02	.0004										
Smallpox	4	.07							.38	.01	4	.08							.38	.01										
Measles	1,101	19.93				25	25	.45	56.19	1.02	1,097	20.97				25	25	.48	55.99	1.07	4	1.36							.19	.07
Scarlet fever	7	.13							.78	.01	7	.13							.78	.01										
Diphtheria	43	.78	1	1	.02				2.67	.05	41	.78	1	1	.02				2.58	.05	2	.68							.08	.03
Influenza	1,179	21.34							18.12	.33	1,166	22.29							17.95	.34	13	4.43							.17	.06
Cholera nostras	1	.02							.06	.001	1	.02							.06	.001										
Dysentery	113	2.05	4	4	.07				7.62	.14	109	2.08	4	4	.08				7.30	.14	4	1.36							.32	.11
Amebic	54	.98	4	4	.07				5.21	.09	52	.99	4	4	.08				5.08	.10	2	.68							.13	.05
Bacillary	4	.07							.37	.01	4	.08							.37	.01										
Mixed infections and other dysenteries	55	1.00							2.04	.04	53	1.01							1.85	.04	2	.68							.18	.06
Erysipelas	41	.74							2.09	.04	39	.75							2.01	.04	2	.68							.08	.03
Dengue	3	.05							.04	.001	3	.06							.04	.001										
Mumps	757	13.70							33.48	.61	749	14.32							33.18	.63	8	2.73							.30	.10
Cerebrospinal meningitis, epidemic	2	.04				2	2	.04	.02	.0004	2	.04				2	2	.04	.02	.0005										

Vaccinia	**1,574**	**28.50**							**16.85**	**.31**	**1,550**	**29.63**							**16.55**	**.32**	**24**	**8.18**							**.30**	**.10**
Purulent infection and septicemia	3	.05				2	2	.04	.10	.002	3	.06				2	2	.04	.10	.002												
Tuberculosis, all	215	3.89	210	158	2.85	31	29	.52	90.08	1.63	199	3.80	202	150	2.85	29	27	.51	86.65	1.66	16	5.46	8	8	2.73	2	2	.68	3.44	1.17
Tuberculosis, pulmonary (1)	174	3.15	193	143	2.58	21	19	.34	81.86	1.48	164	3.14	187	137	2.61	19	17	.32	79.67	1.52	10	3.41	6	6	2.05	2	2	.68	2.19	.75
Tuberculosis of other organs (11)	41	.74	17	15	.27	10	10	.18	8.23	.16	35	.67	15	13	.25	10	10	.19	6.98	.14	6	2.04	2	2	.68				1.25	.42
Venereal diseases, all	9,051	163.85	86	73	1.31	7	6	.11	487.31	8.82	8,632	165.03	82	69	1.31	7	6	.11	465.94	8.91	419	142.85	4	4	1.36				21.37	7.29
Syphilis and its results	2,447	44.30	35	29	.52	7	6	.11	155.98	2.82	2,371	45.33	31	25	.48	7	6	.11	149.22	2.85	76	25.91	4	4	1.36				6.76	2.30
Chancroid and its results	1,383	25.04	1	0					73.08	1.32	1,319	25.22	1	0					70.00	1.34	64	21.82							3.08	1.05
Gonorrhea and its results	5,221	94.52	50	44	.79				258.26	4.68	4,942	94.48	50	44	.84				246.73	4.72	279	95.12							11.53	3.93
Cancer and other malignant growths	14	.25	2	2	.04	5	5	.09	2.73	.05	14	.27	2	2	.04	5	5	.10	2.73	.05												
Tumors, nonmalignant	85	1.54							2.55	.05	81	1.55							2.45	.05	4	1.36							.10	.04
Rheumatism, articular, all	578	10.47	17	16	.29				39.89	.72	539	10.30	15	14	.27				38.01	.73	39	13.30	2	2	.68				1.88	.64
Rheumatic fever	355	6.43							21.02	.38	337	6.44							19.81	.38	18	6.14							1.21	.41
Rheumatism, subacute and chronic	223	4.04	17	16	.29				18.87	.34	202	3.86	15	14	.27				18.20	.35	21	7.16	2	2	.68				.67	.23
Alcoholism and its results	1,122	20.31	12	10	.18	5	5	.09	15.79	.29	1,097	20.97	12	10	.19	5	5	.10	15.55	.30	25	8.52							.25	.08
Insanity	93	1.68	106	82	1.48				25.23	.46	85	1.63	104	80	1.52				24.16	.26	8	2.73	2	2	.68				1.07	.36
Epilepsy	97	1.76	26	20	.36				7.06	.13	93	1.78	25	19	.36				6.85	.13	4	1.36	1	1	.34				.21	.07
Tetanus	1	.02				1	1	.02	.003	.00005	1	.02				1	1	.02	.003	.00005												
Trachoma	24	.43	3	3	.05				1.32	.02	24	.46	3	3	.06				1.32	.03												
Organic diseases of the heart	110	1.99	41	38	.68	16	16	.29	10.87	.19	100	1.93	37	34	.65	12	12	.23	9.81	.18	10	3.41	4	4	1.36	4	4	1.36	1.06	.37
Aneurism	2	.04	3	3	.05	5	5	.09	.74	.01	2	.04	3	3	.06	4	4	.08	.74	.01						1	1	.34		
Functional diseases of heart	70	1.27	6	5	.09				4.58	.08	66	1.26	6	5	.10				4.52	.09	4	1.36							.06	.02
Bronchitis	1,900	34.40	3	3	.05				37.12	.67	1,780	34.03	2	2	.04				34.97	.67	120	40.92	1	1	.34				2.14	.73
Broncho-pneumonia	19	.34				5	5	.09	1.93	.03	15	.29				4	4	.08	1.69	.03	4	1.36				1	1	.34	.24	.08
Pneumonia	109	1.97				18	18	.32	10.56	.19	106	2.03				18	18	.34	10.41	.20	3	1.02							.14	.05
Diarrhea and enteritis	1,549	28.04	2	1	.02				18.18	.33	1,481	28.31	2	1	.02				17.01	.33	68	23.18							1.17	.40
Intestinal parasites	172	3.11							4.14	.07	172	3.30							4.14	.08												
Tenia saginata	45	.81							.71	.01	45	.86							.71	.01												
Tenia solium	13	.24							.25	.005	13	.25							.25	.005												
Bothriocephalus latus	1	.02							.01	.0001	1	.02							.01	.0002												
Ascaris lumbricoides	3	.05							.06	.001	3	.06							.06	.001												
Oxyuris vermicularis	1	.02							.01	.0001	1	.02							.01	.0002												
Ankylostoma duodenale	4	.07							.20	.004	4	.08							.20	.004												
Necator Americanus	105	1.90							2.90	.07	105	2.01							2.90	.06												
Hernia	249	4.35	23	21	.38				22.49	.41	233	4.45	23	21	.40				21.86	.42	7	2.39							.63	.22
Hepatic abscess	12	.22	6	6	.11	2	2	.04	6.13	.11	9	.17	5	5	.10	2	2	.04	5.12	.10	3	1.02	1	1	.34				1.01	.34
Appendicitis	331	5.99	5	5	.09	5	5	.09	23.93	.43	315	6.02	5	5	.10	4	4	.08	23.17	.44	16	5.46				1	1	.34	.76	.26

TABLE NO. 69.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the United States, continental (excluding Alaska), for the year 1911, American troops, enlisted men*—Continued.

Causes of admission to sick report.	United States, continental, excluding Alaska, total.										United States, continental, excluding Alaska, white.										United States, continental, excluding Alaska, colored.									
Mean strength	S. G. O., 55,240—A. G. O., 55,515.										S. G. O., 52,307—A. G. O., 52,582.										S. G. O., 2,933—A. G. O., 2,933.									
	Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
			1.	2.		1.	2.						1.	2.		1.	2.						1.	2.		1.	2.			
Tropical ulcer	2	0.04							0.15	0.003	2	0.04							0.15	0.003									
Jiggers, sarcopsiliasis	5	.09							.19	.003	5	.10							.19	.004									
Pemphigus contagiosus	4	.07							.13	.002	4	.08							.13	.003									
Dhobie itch	25	.45							.62	.01	18	.34							.31	.01	7	2.39						0.31	0.11
Tinea imbricata	2	.04							.09	.002	2	.04							.09	.002									
Prickly heat	25	.45							.42	.01	25	.48							.42	.01									
Ground itch	1	.02							.08	.001	1	.02							.08	.001									
Acute nephritis	19	.34	1	1	0.02	2	2	0.04	2.02	.04	18	.34	1	1	0.02	2	2	0.04	1.97	.04	1	.34						.05	.02
Chronic nephritis	31	.56	8	6	.11	5	4	.07	5.19	.09	29	.55	7	5	.10	5	4	.08	4.87	.09	2	.68	1	1	0.34			.32	.11
Pyelitis and pyelonephritis	7	.13							.91	.02	6	.11							.89	.02	1	.34						.02	.01
Malingering	36	.65							.75	.01	31	.59							.75	.01	5	1.70						.05	.02
EXTERNAL CAUSES, SPECIAL.																													
Fractures	637	11.53	40	34	.61	15	15	.27	75.77	1.37	609	11.64	38	38	.72	15	15	.29	72.52	1.38	28	9.55	2	2	.68			3.25	1.11
Dislocations	174	3.15	4	3	.05	1	1	.02	7.26	.13	161	3.08	4	4	.08	1	1	.02	6.60	.13	13	4.43						.66	.22
Sprains and muscular strains	2,540	45.98	4	4	.07				50.75	.92	2,391	45.71	4	4	.08				47.72	.91	149	50.80						3.03	1.03
Wounds, gunshot	109	1.97	15	11	.20	39	39	.70	11.93	.22	98	1.87	14	14	.27	34	34	.25	10.14	.19	11	3.75	1	1	.34	5	5	1.70	1.79	.61
Wounds other than gunshot	1,875	33.95	14	10	.18	2	2	.04	45.78	.83	1,775	33.93	14	14	.27	2	2	.04	43.18	.83	100	34.09						2.60	.89
Sunstroke	9	.16							.16	.003	9	.17							.16	.003									
Frostbite	53	.96	1						1.02	.02	41	.78	1	1	.02				.78	.01	12	4.09						.24	.08
Drowning						14	14	.25								13	13	.25								1	1	.34		
Poisoning, acute	59	1.07				6	6	.11	.77	.01	56	1.08				6	6	.11	.73	.01	3	1.02						.04	.02

Snake bite and other venomous bites, etc.	56	.1.02							1.45	.03	50	.96							1.06	.02	6	2.05						.39	.14
DISEASES AND INJURIES GROUPED.																															
General diseases	21,346	386.42	353	280	5.04	96	86	1.55	879.06	15.91	205.77	293.38	338	265	5.04	87	83	1.58	847.55	16.20	769	262.19	15	15	5.11	3	3	1.02	31.52	10.75
Diseases, infectious	10,203	184.70	7	6	.11	34	30	.54	229.41	4.15	9,938	189.99	7	6	.11	33	29	.55	225.03	4.30	265	90.35				1	1	.34	4.38	1.49
Other general diseases	11,143	201.72	346	274	4.93	56	56	1.01	649.65	11.76	10,639	203.40	331	259	4.93	54	54	1.03	622.51	11.90	504	171.84	15	15	5.11	2	2	.68	27.14	9.25
Diseases of the nervous system and organs of special sense	1,728	31.29	237	180	3.24	4	4	.07	108.29	1.96	1,643	31.40	233	176	3.35	4	4	.08	104.97	2.01	85	28.98	4	4	1.36				3.32	1.13
Of the nervous system	723	13.09	197	146	2.63	4	4	.07	65.23	1.18	668	12.77	194	143	2.72	4	4	.08	63.09	1.21	55	18.75	3	3	1.02				2.14	.73
Of the eye and its adnexa	587	10.63	17	15	.27				21.98	.40	560	10.70	16	14	.27				20.85	.40	27	9.21	1	1	.34				1.14	.39
Of the ear and its adnexa	418	7.57	23	19	.34				21.08	.38	415	7.93	23	19	.36				21.04	.40	3	1.02							.04	.01
Diseases of the circulatory system	1,081	19.57	55	51	9.18	22	22	.40	56.90	1.03	1,004	19.19	51	47	.89	17	17	.32	53.33	1.02	77	26.25	4	4	1.36	5	5	1.70	3.57	1.22
Diseases of the respiratory system	3,400	61.55	19	16	.29	26	25	.45	83.61	1.51	3,197	61.12	17	14	.27	25	24	.46	78.75	1.51	203	69.21	2	2	.68	1	1	.34	4.86	1.66
Diseases of the digestive system	6,309	114.21	51	46	.83	12	12	.22	145.29	2.63	6,009	114.88	49	44	.84	10	10	.19	137.52	2.63	300	102.28	2	2	.68	2	2	.68	7.76	2.65
Diseases of the genito-urinary system	657	11.89	37	33	.59	9	8	.14	31.16	.56	603	11.53	32	28	.53	9	8	.15	28.70	.55	54	18.41	5	5	1.70				2.46	.84
Diseases of the skin and cellular tissue	3,467	62.76	10	9	.16				79.06	1.43	3,381	64.63	10	9	.17				76.68	1.47	86	29.32							2.38	.81
Diseases of the organs of locomotion	1,467	26.56	29	26	.47				46.71	.85	1,350	25.81	28	25	.48				43.46	.83	117	39.89	1	1	.34				3.25	1.11
Malformations, etc	178	3.22	104	94	1.69				15.15	.27	175	3.35	100	90	1.71				14.67	.28	3	1.02	4	4	1.36				.48	.16
Diseases, results of old age			1	1	.02				.02	.0003			1	1	.02				.02	.0003											
Ill-defined diseases	462	8.36							13.70	.25	432	8.26							13.04	.25	30	10.23							.66	.23
Total for disease	40,095	725.83	896	736	13.26	163	157	2.83	1458.96	26.41	38,371	733.57	859	699	13.29	152	146	2.78	1398.70	26.74	1,724	587.79	37	37	12.62	11	11	3.75	60.26	20.55
External causes	8947	161.97	114	97	1.75	105	105	1.89	275.46	4.99	8,445	161.45	109	92	1.75	96	96	1.82	258.34	4.94	502	171.16	5	5	1.70	9	9	3.07	17.12	5.83
Total for disease and external causes	49,042	887.80	1,010	833	15.00	268	262	4.72	1734.42	31.40	46,816	895.02	968	791	15.04	248	242	4.60	1657.04	31.68	2,226	758.95	42	42	14.32	20	20	6.82	77.38	26.38
Subclassification (repeated above):																															
Suicide						33		.59								31		.59								2		.68		
Homicide						11		.20								9		.17								2		.68		

TABLE NO. 70.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for Alaska, Hawaii, and American troops serving in the Philippine Islands for the year 1911.*

Causes of admission to sick report.	Alaska.								Hawaii.								Philippine Islands.							
Mean strength	S. G. O., 1,119—A. G. O., 1,119.								S. G. O., 2,014—A. G. O., 2,014.								S. G. O., 12,454—A. G. O., 12,454.							
	Admissions.		Discharges.			Deaths.			Admissions.		Discharges.			Deaths.			Admissions.		Discharges.			Deaths.			Noneffective.	
	Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
Typhoid fever																	(3) 12	0.96							2.47	0.20
Fevers, undetermined	1	0.89							9	4.47							84	6.74							1.95	.16
Malaria									14	6.95							941	75.56		1	0.08	1	1	0.08	22.17	1.78
Quartan																	18	1.45							.32	.03
Tertian									13	6.45							633	50.83				1	1	.08	13.36	1.07
Aestivo-autumnal																	282	22.64							8.17	.66
Malarial cachexia									1	.50							7	.56		1	.08				.26	.02
Undetermined malarial infection																	1	.08							.06	.005
Hemoglobinuric fever																	1	.08							.3	.002
Smallpox																	1	.08							.13	.01
Measles	2	1.79							17	8.44							39	3.13							3.82	.31
Scarlet fever																									.01	.001
Diphtheria									2	.99																
Influenza	1	.89							13	6.45							4	.32							.07	.01
Dysentery									6	2.98							179	14.37				1	1	.08	11.25	.90
Amebic									4	1.99							131	10.52							8.86	.71
Bacillary																	24	1.93				1	1	.08	1.09	.09
Mixed infections and other dysenteries									2	.99							24	1.93							1.30	.10
Erysipelas																	2	.16							.07	.01
Dengue									1	.50							1,444	115.95							24.81	1.99
Mumps									34	16.88							155	12.45							9.23	.74
Cerebrospinal meningitis, epidemic																	1	.08				1	1	.08	.32	.03
Vaccinia	1	.89							4	1.99															.03	.01
Purulent infection and septicemia																	1	.08				1	1	.08	.01	.0004
Tuberculosis, all	3	2.68		1	0.89	1	1	0.89	.21	.19	4	1.99		4	1.99				42	.21	47	3.77		47	3.77		1	.08	3.63	.29

Tuberculosis, pulmonary	2	1.79						.05	.05	3	1.49		3	1.49			.18	.09	46	3.69		46	3.66		1	.08	3.44	.28
Tuberculosis of other organs	1	.89		1	.89	1	1	.89	.15	.14	1	.50		1	.50			.24	.12	1	.08		1	.08				.18	.01
Venereal diseases, all	39	34.83						2.59	2.32	353	175.27		5	2.48			31.78	15.78	3,800	305.12		8	.64		1	.08	207.11	16.63
Syphilis and its results	7	6.25						.48	.44	102	50.65		4	1.99			12.27	5.08	972	78.05		2	.16		1	.08	49.72	3.99
Chancroid and its results	1	.89						.05	.04	32	15.89						1.85	.92	1,102	88.48		1	.08				62.57	5.02
Gonorrhea and its results	31	27.69						2.05	1.84	219	108.74		1	.50			19.70	9.79	1,726	138.59		5	.40				94.82	7.61
Cancer and other malignant growths																			2	.16					1	1	.08	.25	.02
Tumors, nonmalignant										6	2.98						.10	.05	11	.88								.25	.02
Rheumatism, articular, all	3	2.68						.12	.11	10	4.97						.54	.27	91	7.31		1	.08				7.65	.62
Rheumatic fever	3	2.68						.12	.11	3	1.49						.29	.14	60	4.82							3.32	.27
Rheumatism, subacute and chronic, articular										7	3.48						.25	.13	31	2.49		1	.08				4.33	.35
Alcoholism and its results	33	29.49				1	1	.89	.32	.29	40	19.86					.47	.23	355	28.50		2	.16				5.33	.43
Insanity	1	.89		1	.89				.01	.01	3	1.49		2	.99		.30	.15	25	2.01	1	22	1.77				2.66	.21
Epilepsy	2	1.79		1	.89				.01	.01	1	.50					.01	.01	21	1.69		5	.40				1.69	.14
Tetanus																			2	.16					2	2	.16	.03	.002
Trachoma	1	.89							.02	.02									1	.08								.16	.01
Organic diseases of the heart										4	1.99		1	.50			.93	.46	20	1.61		2	.16		5	5	.40	1.12	.08
Aneurism	1	.89				2	2	1.79	.01	.01																		.04	.003
Functional diseases of the heart										4	1.99						.27	.12	20	1.61		1	.08				.94	.08
Bronchitis	23	20.55							.47	.42	54	26.82					.99	.49	40	3.21							7.18	.58
Broncho-pneumonia	4	3.57							.46	.41	1	.50					.08	.04	10	.80					1	1	.08	.79	.06
Pneumonia	5	4.47							.38	.34	3	1.49				1	1	0.50	.21	.10	5	.40			1	1	.08	.64	.05
Diarrhea and enteritis										45	22.34						.79	.39	574	46.09		1	.08				11.45	.92
Intestinal parasites	4	3.57							.03	.02	8	3.97					.17	.09	73	5.86							2.13	.17
Tenia saginata	1	.89							.01	.01	2	.99					.05	.03	15	1.20							.24	.02
Tenia solium	2	1.79							.01	.01	4	1.99					.07	.03	4	.32							.12	.01
Hymenolepis nana																			1	.08							.03	.002
Ascaris lumbricoides	1	.89							.003	.002									24	1.93							.85	.07
Ankylostoma duodenale																			10	.80							.36	.03
Necator Americanus										2	.99						.05	.03	16	1.28							.51	.04
Trichocephalus (trichuris)																			1	.08							.01	.0004
Other intestinal parasites																			2	.16							.03	.002
Hernia	1	.89							.08	.08	15	7.45		1	.50			1.43	.71	48	3.85		1	.08				4.84	.38
Hepatic abscess																			1	.08							.33	.03
Appendicitis	1	.89							.12	.11	16	7.94						1.68	.84	99	7.95					1	1	.08	7.88	.63
Climatic bubo																			9	.72							.47	.04
Tropical ulcer																			2	.16							.02	.002
Pemphigus contagiosus																			6	.48							.16	.01
Dhobie itch										3	1.49						.08	.04	126	10.12							3.09	.25
Tinea imbricata	1	.89							.05	.04																			
Prickly heat																			11	.88							.10	.01
Acute nephritis																			2	.16					1	1	.08	.17	.01
Chronic nephritis	1	.89				1	1	.89	.10	.09	5	2.48				1	1	.50	.44	.22	5	.40		2	.16	1	1	.08	.67	.05
Pyelitis and pyelonphritis	1	.89							.02	.02	2	.99							.78	.39	2	.16						.04	.003
Malingering											2	.99							.13	.07	2	.16						.01	.001

(1) Number of discharges and deaths which actually occurred.

(2) Number of discharges and deaths including those of cases invalided home and deducted from the United States.

(3) Recent communication from Surgeon Ludlow Barracks, P. I., changes 1 case of typhoid fever to Aestivo-autumnal fever, thus reducing the number of cases in the division to 11 and ratio to .88.

TABLE NO. 70.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for Alaska, Hawaii, and American troops serving in the Philippine Islands for the year 1911*—Continued.

Causes of admission to sick report.	Alaska.								Hawaii.								Philippine Islands.							
Mean strength	S. G. O., 1,119—A. G. O., 1,119.								S. G. O., 2,014—A. G. O., 2,014.								S. G. O., 12,454—A. G. O., 12,454.							
	Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
	Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
EXTERNAL CAUSES, SPECIAL.																												
Fractures	14	12.51							1.15	1.02	34	16.88		1	0.50										3.65	1.81	116	9.32		5	0.40	5	5	0.40	13.40	1.08
Dislocations	3	2.68							.20	.18	9	4.47													.11	.05	26	2.09		1	.08				1.43	.11
Sprains and muscular strains	45	38.43							1.62	.92	139	69.02													3.83	1.90	529	42.48							10.78	.87
Wounds, gunshot	2	1.79		1	0.89	1	1	0.89	.77	.69	5	2.48					3	3	1.49	.59	.30	33	2.65		3	.24	9	9	.72	3.73	.30
Wounds, other than gunshot	27	24.13							.47	.42	136	67.53													3.43	1.70	536	43.04		4	.32	8	8	.64	13.09	1.05
Sunstroke																											2	.16							.04	.004
Frostbite	6	5.36		1	.89				.77	.69																						8	8	.64		
Drowning																	1	1	.50													3	3	.24	2.61	.21
Poisoning, acute	1	.89							.01	.01	13	6.46													.13	.07	220	17.67							.77	.06
Snake bite	1	.89							.03	.03																										
Other venomous bites, etc											5	2.48													.05	.02	30	2.41								
DISEASES AND INJURIES GROUPED.																																				
General diseases	112	100.09		1	.89	2	2	1.79	3.74	3.34	590	292.95		9	4.47										37.82	18.78	7,408	594.82		63	5.06	7	9	.72	304.61	24.46
Infectious diseases	33	29.49							.49	.44	177	87.88													4.52	2.24	3,084	247.63		1	.08	3	3	.24	78.88	6.33
Other general diseases	79	70.60		1	.89	2	2	1.79	3.24	2.90	413	205.06		9	4.47										33.30	16.54	4,324	347.20		62	4.98	4	6	.48	225.73	18.12
Diseases of the nervous system and organs of special sense	24	21.44							.66	.58	90	44.69		11	5.46										4.56	2.26	526	42.24	1	45	3.61	1	1	.08	23.38	1.88
Of the nervous system	11	9.83		2	1.79				.30	.27	35	17.38		8	3.97										1.94	.96	246	19.75	1	42	3.37	1	1	.08	14.19	1.14
Of the eye and its adnexa	9	8.04							.26	.23	35	17.38		2	.99										1.68	.83	157	12.61							5.11	.41
Of the ear and its adnexa	4	3.57							.09	.08	20	9.93		1	.50										.94	.47	123	9.88		3	.24				4.08	.33
Diseases of the circulatory system	13	11.62				2	2	1.79	.31	.27	67	33.27		1	.50										4.79	2.38	387	31.07		3	.24	5	5	.40	19.82	1.59
Diseases of the respiratory system	49	43.79							1.79	1.60	161	79.94		2	.99		1	1	.50						3.18	1.58	519	41.67		1	.08	3	4	.32	16.49	1.32
Diseases of the digestive system	40	35.74				1	1	.89	.92	.83	273	135.55		2	.99										7.98	3.96	1,972	158.34		3	.24	3	3	.24	50.46	4.05
Diseases of the genito-urinary system	13	11.62					1	.89	.38	.34	40	19.86		1	.50		1	1	.50						2.59	1.29	206	16.54		3	.24	2	2	.16	7.83	.63

Diseases of the skin and cellular tissue	32	28.60							.56	.50	288	143.00			1	.50				7.47	3.71	1,342	107.76								31.95	2.57
Diseases of the organs of locomotion	27	24.13							.88	.79	86	42.70								3.11	1.55	274	22.01			3	.24				10.05	.81
Malformations, etc											3	1.49								.39	.19	28	2.25			10	.80				2.86	.23
Ill-defined diseases	6	5.36							.08	.07	31	15.39								.97	.48	136	10.92								3.67	.30
Total for disease	316	282.40	..	3	2.68	5	6	5.36	9.30	8.31	1629	808.84		27	13.41	2	2	.99	72.87	36.18	12,798	1,027.62	1	131	10.52	21	24	1.93	471.12	37.83
External causes	152	135.83		2	1.79	1	1	.89	5.41	4.83	547	271.60		1	.50	4	4	1.99	16.79	8.34	2,374	190.62		14	1.12	42	42	3.37	66.25	5.32
Total for disease and external causes	468	418.23		5	4.47	6	7	6.25	14.71	13.14	2176	1,080.44		28	13.90	6	6	2.98	89.66	41.52	15,172	1,218.24	1	145	11.64	63	66	5.30	537.37	43.15
Subclassification (repeated above):																																
Suicide						1		.89								2	2	.99								9		.72				
Homicide																										6		.48				
Killed in action																										4		.32				
Wounded in action																					9	.72										

TABLE No. 71.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for American troops in the Panama Canal Zone, and on transports, for the year 1911.*

Causes of admission to sick report.	Panama Canal Zone.								Transports.							
Mean strength	S. G. O. 204—A. G. O. 204.								S. G. O. 1,700—A. G. O. 1,700.							
	Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.			Noneffective.
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
Typhoid fever									1	0.59				1	0.59	0.01	0.01
Paratyphoid fever	1	4.90					0.08	0.39									
Fevers, undetermined	11	53.92					.31	1.50	2	1.18						.04	.02
Malaria	11	53.92					.48	2.35	55	32.35						.97	.57
Quartan									1	.59						.02	.01
Tertian	3	14.71					.24	1.17	44	25.88						.77	.45
Aestivo-autumnal	8	39.22					.24	1.18	2	1.18						.04	.03
Malarial cachexia									3	1.76						.07	.04
Undetermined malarial infection									5	2.94						.07	.04
Smallpox																.003	.002
Measles									99	58.23						2.44	1.44
Diphtheria	1	4.90					.03	.16									
Influenza									4	2.35						.08	.05
Dysentery									4	2.35						.25	.15
Amebic									3	1.76						.23	.13
Bacillary									1	.59						.02	.01
Dengue									5	2.94						.16	.09
Mumps									106	62.35						3.26	1.92
Cerebrospinal meningitis, epidemic									1	.59						.003	.002
Vaccinia									1	.59						.02	.01
Tuberculosis, all									3	1.76				1	.59	4.13	2.43
Tuberculosis, pulmonary									3	1.76				1	.59	4.02	2.36
Tuberculosis of other organs																.11	.06
Venereal diseases, all	24	117.65					1.13	5.55	200	117.65						7.96	4.68
Syphilis and its results	8	39.22					.22	1.07	38	22.35						2.04	1.20
Chancroid and its results	7	34.31					.41	2.01	35	20.59						1.58	.93
Gonorrrhea and its results	9	44.12					.50	2.46	127	74.71						4.34	2.55
Cancer and other malignant growths																.04	.02
Rheumatism, articular, all	6	29.41					.05	.26	5	2.94						.28	.17
Rheumatic fever	1	4.90					.01	.03	4	2.35						.02	.01
Rheumatism, subacute and chronic, articular	5	24.51					.05	.23	1	.59						.26	.15
Alcoholism and its results	1	4.90					.003	.01	11	6.47						.51	.30
Insanity									4	2.35						2.67	1.57
Epilepsy	3	14.71					.10	.51	2	1.18						.75	.44
Trachoma									1	.59						.04	.02
Organic diseases of the heart	2	9.80					.08	.38								.26	.15
Aneurism																.08	.05

Functional diseases of the heart																			.09	.05
Bronchitis, acute and chronic	16	78.43					.27	1.32	72	42.35									.95	.56
Broncho-pneumonia																			.01	.01
Pneumonia									5	2.94									.26	.15
Diarrhea and enteritis	2	9.80					.01	.07	16	9.41									.46	.27
Intestinal parasites	2	9.80					.01	.07	1	.59									.02	.01
Tenia saginata	2	9.80					.01	.07												
Necator Americanus									1	.59									.02	.01
Herniæ	2	9.80					.16	.77											.16	.09
Appendicitis	2	9.80					.14	.67	4	2.35									.21	.12
Climatic bubo									1	.59									.02	.01
Dhobie itch									1	.59									.01	.01
Acute nephritis									1	.59					1	1	.59		.01	.003
Chronic nephritis									1	.59									.30	.18
Pyelitis and pyelonephritis																			.01	.003
Malingering									1	.59									.01	.005
EXTERNAL CAUSES, SPECIAL.																				
Fractures	4	19.61			1	4.90	.11	.55	11	6.47									.76	.45
Dislocations									1	.59									.01	.005
Sprains and muscular strains	12	58.82					.24	1.18	11	6.47									.24	.14
Wounds, gunshot																			.24	.14
Wounds other than gunshot	2	9.80					.11	.54	10	5.88									.49	.29
Drowning															1	1	.59			
Poisoning, acute									1	.59									.07	.04
Other venomous bites									1	.59									.02	.01
DISEASES AND INJURIES GROUPED.																				
General diseases	60	294.12					1.99	9.76	593	348.82									21.92	12.90
Diseases, infectious	29	142.16					.81	3.95	372	218.82						1	.59		8.48	4.99
Other general diseases	31	151.96					1.19	5.82	221	130.00						1	.59		13.44	7.91
Diseases of the nervous system and organs of special sense	8	39.21					.28	1.40	52	30.59					1	1	.59		6.20	3.65
Of the nervous system	7	34.31					.21	1.05	34	20.00					1	1	.59		5.44	3.20
Of the eye and its adnexa	1	4.90					.07	.35	8	4.71									.44	.26
Of the ear and its adnexa									10	5.88									.32	.19
Diseases of the circulatory system	13	63.73					.40	1.96	13	7.65									.99	.58
Diseases of the respiratory system	25	122.55					.34	1.65	96	56.47									1.81	1.07
Diseases of the digestive system	24	117.65					.44	2.15	124	72.94									2.23	1.31
Diseases of the genito-urinary system	5	24.51					.20	.97	10	5.88					1	1	.59		.73	.43
Diseases of the skin and cellular tissue	12	58.82					.35	1.69	60	35.29									.81	.47
Diseases of the organs of locomotion	9	44.12					.30	1.45	11	6.53									.67	.40
Malformations, etc																			1.00	.59
Ill-defined diseases	11	53.92					.31	1.50	7	4.12					1	1	.59		.30	.18
Total for disease	167	818.63					4.60	22.54	966	568.24					3	5	2.94		36.66	21.57
External causes	25	122.55			1	4.90	.63	3.10	52	30.59					1	1	.59		2.83	1.66
Total for diseases and external causes	192	941.18			1	4.90	5.23	25.64	1,018	598.83					4	6	3.53		39.49	23.23
Subclassification (repeated above):																				
Suicide															1	1	.59			
Homicide					1	4.90														

NOTE.—(1) Number of deaths which actually occurred; (2) number of deaths including those of cases invalided home and deducted from the United States.

TABLE No. 72.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for Porto Rican native troops and Filipino troops for the year 1911.*

	Porto Rican native troops.[1]								Philippine Scouts.							
Mean strength	S. G. O., 563—A. G. O., 563.								S. G. O., 5,266—A. G. O., 5,372.							
Causes of admission to sick report.	Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Typhoid fever	1	1.72			1	1.72	0.08	0.15	12	2.28					2.01	0.38
Fevers, undetermined	1	1.72					.01	.01	45	8.55					.62	.12
Malaria	76	131.03					1.15	1.97	1,275	242.12			3	.57	23.96	4.55
Quartan									3	.57					.03	.01
Tertian	70	120.69					1.05	1.80	1,015	192.75					17.88	3.40
Aestivo-autumnal	6	10.35					.10	.17	238	45.20			2	.38	5.56	1.06
Malarial cachexia									7	1.33			1	.19	.28	.05
Undetermined malarial infection									12	2.28					.20	.04
Smallpox	4	6.90					.25	.43	11	2.09					.75	.14
Measles									3	.57					.11	.02
Influenza	27	46.55					.30	.51	5	.95					.04	.01
Dysentery	11	18.97			1	1.72	.26	.44	41	7.79					2.75	.52
Amebic	11	18.97			1	1.72	.26	.44	30	5.70					2.27	.43
Bacillary									2	.38					.25	.05
Mixed infections and other dysenteries									9	1.71					.23	.04
Leprosy									2	1.38	2	0.38			.20	.04
Beriberi									3	.57			1	.19	.65	.12
Dengue									81	5.38					1.66	.31
Mumps	1	1.72					.02	.04	39	7.40					1.54	.29
Cerebrospinal meningitis, epidemic									1	.19			1	.19	.005	.001
Yaws									1	.19					.01	.003
Vaccinia	3	5.17					.04	.06	4	.76					.04	.01
Tuberculosis, all	1	1.72	2	3.45			.39	.67	17	3.23	11	2.09	2	.38	1.77	.34
Tuberculosis, pulmonary	1	1.72	2	3.45			.39	.67	15	2.85	11	2.09	1	.19	1.59	.30
Tuberculosis of other organs			1	1.72					2	.38			1	.19	.17	.03
Venereal diseases, all	111	191.38	1	1.72			6.65	11.47	306	58.11					19.09	3.63
Syphilis and its results	17	29.31					1.59	2.75	28	5.32					2.31	.44
Chancroid and its results	59	101.72					3.43	5.92	35	6.65					2.68	.51
Gonorrhea and its results	35	60.34	1	1.72			1.63	2.81	243	46.14					14.10	2.68
Cancer and other malignant growths									1	.19					.05	.01
Tumors, nonmalignant	2	3.45					.03	.05	6	1.14					.13	.03
Rheumatism, acute, articular	2	3.45					.02	.04	24	4.56					1.01	.19

Rheumatic fever	2	3.45					.02	.04	21	3.99					.83	.16
Rheumatism, subacute and chronic, articular									3	.57					.17	.03
Alcoholism and its results	1	1.72					.02	.03	4	.76					.02	.004
Insanity	2	3.45					.27	.47	5	.95	5	.95			1.04	.20
Epilepsy									1	.19					.06	.01
Trachoma									3	.57					.18	.03
Organic diseases of the heart	1	1.72					.05	.09	1	.19			3	.57	.18	.03
Filariasis	12	20.69					.47	.80	4	.76	1	.19			.40	.07
Lymphangitis and elephantoid fever	3	5.17					.09	.15								
Elephantiasis							.04	.07								
Other filariasis	9	15.52					.34	.59	4	.76	1	.19			.40	.07
Bilharziosis	1	1.72					.02	.03								
Bronchitis	9	15.52					.11	.18	114	21.65					3.00	.57
Broncho-pneumonia									5	.95					.28	.05
Pneumonia									8	1.52			2	.38	.47	.09
Diarrhea and enteritis	7	12.07					.10	.18	110	20.89					1.36	.26
Intestinal parasites	57	98.27					1.18	2.03	218	41.40					3.90	.74
Tenia saginata									2	.38					.06	.01
Tenia solium	1	1.72					.01	.01	2	.38					.04	.01
Ascaris lumbricoides									110	20.89					1.07	.20
Oxyuris vermicularis									1	.19					.02	.003
Ankylostoma duodenale									90	17.09					2.17	.41
Necator Americanus	56	96.55					1.17	2.02	13	2.47					.56	.11
Hernise	1	1.72					.15	.26	2	.38					.24	.05
Hepatic abscess									1	.19			1	.19	.003	.0005
Appendicitis									3	.57			1	.19	.21	.04
Climatic bubo									1	.19					.05	.01
Tropical ulcer	1	1.72					.01	.01	5	.95					.12	.02
Sarcopsiliasis (chiggers)	1	1.72					.06	.11								
Pemphigus contagiosus									1	.19					.01	.002
Dhobie itch									95	18.04					2.96	.56
Tinea imbricata									1	.19					.11	.02
Ground itch									1	.19					.01	.001
Malingering									1	.19					.12	.02
EXTERNAL CAUSES, SPECIAL.																
Fractures	1	1.72	1	1.72			.20	.34	13	2.47	1	.19			1.58	.30
Dislocations							.16	.27	1	.19					.02	.004
Sprains and muscular strains	4	6.90					.05	.09	75	14.24					1.36	.26
Wounds, gunshot	1	1.72			1	1.72	.02	.04	10	1.90			5	.95	1.09	.21
Wounds other than gunshot	20	34.48					.26	.45	121	22.98					3.68	.70
Sunstroke									1	.19					.06	.01
Drowning													2	.38		
Poisoning, acute	4	6.90			1	1.72	.09	.16	8	1.52					.07	.01
Venomous bites, etc.:																
Snake bite									11	2.09					.34	.06
Other venomous bites, etc	1	1.72					.03	.05								

[1] Includes 17 American enlisted men.

TABLE NO. 72.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for Porto Rican native troops and Filipino troops for the year 1911*—Continued.

	Porto Rican native troops.								Philippine Scouts.							
Mean strength	S. G. O., 563—A. G. O., 563.								S. G. O., 5,266—A. G. O., 5,372.							
Causes of admission to sick report.	Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
DISEASES AND INJURIES GROUPED.																
General diseases	269	463.79	3	5.17	2	3.45	9.42	16.25	1,905	361.75	13	2.47	7	1.33	56.68	10.76
Diseases, infectious	152	262.07			2	3.45	2.31	3.99	1,543	293.01	2	.38	5	.95	34.22	6.50
Other general diseases	117	201.72	3	5.17			7.11	12.26	362	68.74	11	2.09	2	.38	22.47	4.27
Diseases of the nervous system and organs of special sense	23	39.65					.86	1.48	97	18.42	7	1.33			4.07	.77
Of the nervous system	5	8.62					.33	.57	27	5.13	6	1.14			2.22	.42
Of the eye and its adnexa	15	25.86					.48	.82	57	10.82	1	.19			1.50	.29
Of the ear and its adnexa	3	5.17					.05	.09	13	2.47					.35	.07
Diseases of the circulatory system	19	32.76					.81	1.40	42	7.98	1	.19	3	.57	1.87	.35
Diseases of the respiratory system	19	32.76					.29	.51	168	31.90			2	.38	4.60	.87
Diseases of the digestive system	143	246.55					2.33	4.01	743	141.09			4	.76	10.77	2.05
Diseases of the genito-urinary system	27	46.55					.86	1.48	25	4.75					.95	.18
Diseases of the skin and cellular tissue	48	82.76	1	1.72			1.45	2.50	424	80.52			1	.19	11.35	2.16
Diseases of the organs of locomotion	11	18.96					.26	.44	52	9.87					1.53	.29
Malformations, etc	1	1.72					.04	.06	5	.95	2	.38			.44	.09
Ill-defined diseases	2	3.45					.01	.02	49	9.30					.88	.17
Total for disease	562	968.97	4	6.90	2	3.45	16.32	28.15	3,510	666.54	23	4.37	17	3.23	93.15	17.69
External causes	47	81.03	1	1.72	2	3.45	.94	1.63	412	78.24	3	.57	7	1.33	11.43	2.17
Total for disease and external causes	609	1,050.00	5	8.62	4	6.90	17.27	29.78	3,922	744.78	26	4.94	24	4.56	104.58	19.86
Subclassification (repeated above):																
Suicide					2	3.45							2	.38		
Homicide													1	.19		
Wounded in action									6	1.14						

TABLE NO. 73.—*Total movement of sick for United States Army at home compared with that of foreign armies.*

	United States (continental), year 1911 (American troops, enlisted men).						British (United Kingdom) year 1910.		French (France), year 1909.		Prussian, year 1909.	
	White and colored.		White.		Colored.							
Mean strength	55,240.		52,307.		2,933.		108,614.		519,622.		545,559.	
	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.
Admitted to sick report, total	49,042	35,510	46,816	33,657	2,226	1,853	85,890	37,576	968,695	346,116	321,276	134,892
Ratio per 1,000 of mean strength	887.80	642.83	895.02	643.45	758.95	631.78	790.78	345.96	2,166	741	588.9	247.3
Admitted for disease	40,095	.....	38,371	.....	1,724	.....	61,724	31,518	.....	.....	.....	.....
Ratio per 1,000 of mean strength	725.83	.....	733.57	.....	587.79	.....	568.29	290.18	.....	.....	.....	.....
Admitted for injury	8,947	.....	8,445	.....	502	.....	24,166	6,058	.....	.....	.....	.....
Ratio per 1,000 of mean strength	161.97	.....	161.45	.....	171.16	.....	222.49	55.78	.....	.....	.....	.....
Disposed of, all causes	49,517	.....	47,272	.....	2,245	.....	.....	.....	.....	.....	322,034	.....
Ratio per 1,000 of mean strength	896.40	.....	903.74	.....	765.42	.....	.....	.....	.....	.....	590.28	.....
Died, of all causes	262	.....	242	.....	20	.....	298	.....	1,952	.....	972	.....
Ratio per 1,000 of mean strength	4.72	.....	4.60	.....	6.82	.....	2.42	.....	3.75	.....	1.78	.....
Ratio per 1,000 of all disposed of	5.29	.....	5.12	.....	8.91	.....	.....	.....	.....	.....	3.02	.....
Died of disease	157	.....	146	.....	11	.....	232	.....	1,709	.....	604	.....
Ratio per 1,000 of mean strength	2.83	.....	2.78	.....	3.75	.....	1.88	.....	3.28	.....	1.11	.....
Died of injury	105	.....	96	.....	9	.....	66	.....	243	.....	368	.....
Ratio per 1,000 of mean strength	1.89	.....	1.83	.....	3.07	.....	.54	.....	.47	.....	.67	.....
Died when on sick report or present with command	176	.....	165	.....	11	.....	.....	.....	1,640	.....	662	.....
Ratio per 1,000 of mean strength	3.19	.....	3.15	.....	3.75	.....	.....	.....	3.16	.....	1.21	.....
Ratio per 1,000 of all disposed of	3.55	.....	3.49	.....	4.90	.....	.....	.....	.....	.....	2.06	.....
Died when not on sick report or absent from command	86	.....	77	.....	9	.....	.....	.....	312	.....	310	.....
Accidental deaths	[1] 72	.....	[1] 65	.....	[1] 7	.....	39	.....	143	.....	136	.....
Suicides	33	.....	31	.....	2	.....	27	.....	100	.....	232	.....
Returned to duty	47,373	.....	45,226	.....	2,147	.....	.....	.....	.....	.....	302,586	.....
Ratio per 1,000 of all disposed of	857.59	.....	864.63	.....	732.01	.....	.....	.....	.....	.....	939.6	.....
Otherwise disposed of	1,049	.....	1,013	.....	36	.....	.....	.....	.....	.....	18,864	.....
Ratio per 1,000 of all disposed of	18.99	.....	19.37	.....	12.27	.....	.....	.....	.....	.....	58.6	.....
Total days lost on account of sickness, all causes	633,063	570,550	604,820	543,520	28,243	27,030	1,081,619	809,599	6,798,774	5,290,793	4,939,273	.....
Constantly noneffective on account of sickness, all causes	1,734.42	1,563.15	1,657.04	1,489.10	77.38	74.05	2,963.34	2,218.08	18,672.78	14,495.15	13,532.25	.....
Ratio per 1,000 of mean strength	31.40	28.30	31.68	28.47	26.38	25.25	27.28	20.42	35.85	27.90	24.80	.....
Average days of treatment—												
For each soldier of mean strength	11.46	10.33	11.56	10.39	9.63	9.22	9.95	7.45	13.08	10.18	9.1	.....
For each case of sickness	12.91	16.07	12.92	16.15	12.69	14.59	12.59	21.55	19.0	15.28	14.9	.....
Discharges for disability, all causes	833	.....	791	.....	42	.....	1,365	.....	18,364	.....	22,423	.....
Ratio per 1,000 of mean strength	15.00	.....	15.04	.....	14.32	.....	11.07	.....	35.34	.....	41.1	.....
Total losses per 1,000 of mean strength	19.72	.....	19.64	.....	21.14	.....	13.49	.....	39.09	.....	42.88	.....

[1] Including 11 homicides—9 white, 2 colored.

TABLE No. 73.—*Total movement of sick for United States Army at home compared with that of foreign armies*—Continued.

	Bavarian, year 1909.		Austro-Hungarian, year 1910.		Spanish, year 1909.		Russian, year 1909.		Portuguese, year 1909.		Japanese, year 1909.	
Mean strength	66,934.				81,321.		1,260,220.		29,159.		196.764.	
	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.
Admitted to sick report, total	30,785	15,455			89,211	35,715	568,927	529,272	22,803	19,220	168,438	29,361
Ratio per 1,000 of mean strength	459.9	230.9	823.2	376.5	1,097.0	439.1	451.5	420.0	782	659	856.30	149.26
Disposed of, all causes	30,814				88,578		565,069		23,011		169,550	
Ratio per 1,000 of mean strength	460.36				1,088.1		448.39		789.16		861.96	
Died, all causes	151				302		5,131		69		703	
Ratio per 1,000 of mean strength	2.26		2.84		3.71		4.07		2.99		3.57	
Ratio per 1,000 of all disposed of	4.90		2.23		3.41		9.08		3.00		4.15	
Died of disease	108				271		4,449				563	
Ratio per 1,000 of mean strength	1.61		1.83		3.33		3.53				2.86	
Died of injury	43				31		682				140	
Ratio per 1,000 of mean strength	.64		1.01		.38		.54				.71	
Died when on sick report or present with command	119				290						571	
Ratio per 1,000 of mean strength	1.78				3.30						2.90	
Ratio per 1,000 of all disposed of	3.86				3.27						3.37	
Died when not on sick report or absent from command	32				12						132	
Accidental deaths	19				24		419				38	
Suicides	24				7		263				102	
Returned to duty	28,477				82,225		508,130		21,414		161,793	
Ratio per 1,000 of all disposed of	924.2		868.2		928.27		899.2		930		954.25	
Otherwise disposed of	2,232				6,094		52,490		1,528		7,186	
Ratio per 1,000 of all disposed of	72.43		129.5		68.79		92.9		66		42.38	
Total days lost on account of sickness, all causes	542,877				944,870				280,534		2,223,860	
Constantly noneffective on account of sickness, all causes	1,487.33				2,588.60				768.59		6,092.77	
Ratio per 1,000 of mean strength	22.22				31.83				26.36		30.97	
Average days of treatment—												
For each soldier of mean strength	8.1		12.9		11.8		10.7		9.62		11.31	
For each case of sickness	17.1		15.1		25.3		23.9		12.30		12.78	
Discharges for disability, all causes	3,299				3,592		52,490				5,298	
Ratio per 1,000 of mean strength	49.3				44.2		41.7				26.94	
Total losses per 1,000 of mean strength	51.56				47.9		45.8				30.51	

TABLE NO. 74.—*A comparison of the admission and death rates of the United States Army at home for certain special diseases with those of foreign armies.*

Diseases.	Admission rates per 1,000 of mean strength.											Death rates per 1,000 of mean strength.										
	United States, continental (enlisted men).			British, year 1910.	French, year 1909.	Prussian, year 1909.	Bavarian, year 1909.	Austro-Hungarian, year 1910.	Spanish, year 1909.	Russian, year 1909.	Japanese, year 1909.	United States, continental (enlisted men).			British, year 1910.	French, year 1909.	Prussian, year 1909.	Bavarian, year 1909.	Austro-Hungarian, year 1910.	Spanish, year 1909.	Russian, year 1909.	Japanese, year 1909.
	White.	Colored.	Total.									White.	Colored.	Total.								
1. Alkoholismus acutus, including delirium tremens	19.63	8.52	19.04	0.7	0.28	0.08	0.19	.....	.....	0.05	0.01	0.04	....	0.04	0.03	0.001	.....	0.01	.....	.....	.....	.....
2. Appendicitis typhlitis, perityphlitis	6.02	5.46	5.99	(1)	1.87	4.5	5.0	.....	0.25	2.1	1.04	.08	0.34	.09	(1)	.06	0.09	.13	....	0.01	0.07	0.04
3. Bronchitis acuta	31.51	38.87	31.90	10.0	92.14	40.6	36.4	91.0	33.07	22.5	43.97	.....	.....	.....	.03	.002	.....	.....	0.01	.06	.....	.....
4. Cholera Asiatica	.....	.....	.....	.....	.....	.....	.....	.....	.....	.11	.01	.....	.....	.....	.03	.....	.....	.....	.....	.....	.03	.01
5. Cholera nostras	.02	.....	.02	.....	.....	.....	.....	.....	.....	.005	.01	.....	.....	.....	.....	.....	.....	.....	.....	.....	.002	.01
6. Diphtheria et croup	.78	.68	.78	.3	1.54	.85	.39	.2	.02	.11	.02	.....	.....	.....	.....	.05	.02	.01	.....	.....	.01	.01
7. Dysenteria	2.08	1.36	2.05	3.1	.26	.08	.81	.2	.04	.8	.53	.....	.....	.....	.08	.003	.....	.....	.2	.....	.09	.08
8. Erysipelas	.75	.68	.74	.2	2.18	.97	1.4	1.2	4.50	3.5	.10	.....	.....	.....	.01	.02	.01	.04	.02	.01	.08	.01
9. Febris intermittens (malaria)	14.36	.68	13.64	52.1	.80	.05	.01	2.8	11.54	31.5	26.28	.....	.....	.....	.04	.005	.....	.....	.....	.....	.01	.02	.05
10. Febris recurrens	.....	.....	.....	(1)	.....	.....	.....	.....	.28	.29	.....	.....	.....	.....	(1)	.....	.....	.....	.....	.....	.01	.002	.....
11. Fractura ossium	11.64	9.55	11.53	(1)	4.86	7.3	5.3	2.6	1.59	1.7	2.16	.29	.....	.27	(1)	.08	.04	.04	.02	.02	.01	.03
12. Gonorrhea	94.48	95.12	94.52	36.8	16.18	12.8	10.3	30.1	37.44	25.3	10.55	.....	.....	.....	.....	.....	.....	.....	.....	.....	.001	.....
13. Hernia	4.45	2.39	4.35	2.8	8.71	2.2	4.6	6.0	3.51	3.2	.77	.....	.....	.....	.01	.003	.....	.....	.....	.....	.002	.01
14. Influenza	22.29	4.43	21.34	9.1	21.14	10.4	11.5	3.1	36.52	31.6	2.92	.....	.....	.....	.....	.21	.01	.....	.01	.15	.10	.....
15. Insolatio (Hitzschlag coup de chaleur)	.17	.....	.16	.7	.18	.21	.48	.2	.03	.03	2.09	.....	.....	.....	.03	.001	.01	.01	.....	.....	.....	.09
16. Luxationes articulorum	3.08	4.43	3.15	(1)	1.78	1.3	1.1	.8	.68	.68	.76	.02	.....	.02	(1)	.....	.....	.....	.....	.....	.....	.....
17. Meningitis cerebrospinalis epidemica	.04	.....	.04	.1	.47	.05	.49	.....	.01	.005	.14	.04	.....	.04	.05	.17	.02	.21	.....	.01	.002	.07
18. Morbilli	20.97	1.36	19.93	.5	16.54	.73	.90	.6	5.01	.26	1.30	.48	.....	.45	.....	.07	.....	.....	.01	.06	.005	.....
19. Parotitis epidemica	14.32	2.73	13.70	.7	20.71	.86	2.7	2.1	7.00	4.2	.33	.....	.....	.....	.....	.....	.....	.....	.....	.....	.001	.....
20. Pleuritis	2.60	5.11	2.73	(1)	9.60	3.3	2.7	5.4	2.09	10.4	15.30	.04	.....	.04	(1)	.10	.03	.03	.04	.04	.17	.14
21. Pneumonia crouposa sive lobaris	2.03	1.02	1.97	2.3	3.72	5.3	5.3	3.0	2.09	4.7	5.18	.34	.....	.32	.28	.29	.20	.28	.13	.12	.35	.30
22. Rheumatismus, articulorum	10.30	13.30	10.47	5.0	22.55	7.4	8.9	12.9	22.29	6.2	6.39	.....	.....	.....	.01	.02	.02	.01	.02	.01	.006	.01
23. Scarlatina	.13	.....	.13	.5	7.94	1.1	2.2	.3	.09	.11	.....	.....	.....	.....	.....	.16	.04	.10	.02	.....	.016	.....
24. Scorbutus	.06	.....	.05	.....	.....	.01	.....	.1	.....	.64	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.007	.....
25. Syphilis	45.33	25.91	44.30	31.5	5.15	4.7	3.0	16.7	16.12	15.3	6.77	.11	.....	.11	.02	.007	.....	.....	.01	.02	.01	.....
26. Trachoma	.46	.....	.43	.....	.03	.32	.....	4.1	.02	5.7	4.70	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
27. Tuberculosis pulmonum	3.14	3.41	3.15	1.5	4.74	1.3	1.2	1.4	5.84	2.7	3.85	.32	.68	.34	.17	.30	.10	.12	.41	.43	.57	.16
28. Tuberculosis ceterorum organorum	.67	2.05	.73	.3	2.08	.44	.31	3.1	.24	1.45	1.26	.20	.....	.18	.06	.31	.09	.09	.20	.07	.12	.33
29. Typhus abdominalis	.82	.34	.80	2.2	2.95	.35	.21	1.3	3.24	5.6	5.47	.10	.34	.11	.28	.47	.03	.06	.20	.82	.78	.55
30. Typhus exanthematicus	.....	.....	.....	.....	.....	.....	.....	.....	.01	.36	.01	.....	.....	.....	.....	.....	.....	.....	.....	.01	.04	.....
31. Ulcus molle	25.22	21.82	25.04	(1)	1.71	1.8	1.5	8.4	40.11	7.3	7.69	.....	.....	.....	(1)	.....	.....	.....	.....	.....	.....	.....

[1] Diseases not reported in table.

TABLE No. 74.—*A comparison of the admission and death rates of the United States Army at home for certain special diseases with those of foreign armies*—Continued.

Diseases.	Admission rates per 1,000 of mean strength.											Death rates per 1,000 of mean strength.										
	United States, continental (enlisted men).			British, year 1910.	French, year 1909.	Prussian, year 1909.	Bavarian, year 1909.	Austro-Hungarian, year 1910.	Spanish, year 1909.	Russian, year 1909.	Japanese, year 1909.	United States, continental (enlisted men).			British, year 1910.	French, year 1909.	Prussian, year 1909.	Bavarian, year 1909.	Austro-Hungarian, year 1910.	Spanish, year 1909.	Russian, year 1909.	Japanese, year 1909.
	White.	Colored.	Total.									White.	Colored.	Total.								
32. Variola	0.08	.....	0.07	.....	0.01	.....	.....	.....	0.47	0.19	0.01	.....	.....	.....	.....	.....	.....	.....	.....	0.02	0.03	.....
33. Morbi auris	7.93	1.02	7.57	7.8	9.79	11.1	11.9	17.8	6.61	17.3	8.33	.....	.....	.....	0.03	0.04	0.01	0.01	0.02	.....	.15	0.01
34. Morbi Cordis	1.97	3.41	2.04	4.6	3.47	3.1	3.0	6.0	7.04	4.6	1.24	0.23	1.36	0.29	.24	.06	.02	.01	.07	.08	.05	.05
35. Morbi cutis	24.43	12.61	23.81	28.6	17.08	17.8	7.6	179.1	49.93	38.3	152.65	.....	.....	.....	.01	.....	.....	.....	.02	.01	.04	.02
36. Morbi mentis	1.63	2.73	1.68	.7	.54	1.3	1.4	1.5	.83	.64	.34	.....	.....	.....	.01	.009	.....	.....	.01	.02	.02	.....
37. Morbi oculi	10.70	9.21	10.63	6.6	5.96	11.9	7.6	33.3	15.42	17.0	27.01	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
38. Morbi systemat. urin et sexual (excluding venerie et syphilis)	11.53	18.41	11.89	9.7	9.41	6.4	5.2	14.3	7.61	7.9	8.62	.15	.....	.16	.13	.08	.04	.....	.06	.03	.08	.05

TABLE No. 75.—*Showing the most important diseases, by divisions, in the United States, continental (excluding Alaska), year 1911—Enlisted men.*

Diseases.	Admissions—absolute numbers.										Proportionate numbers—admissions per 1,000 of mean strength.									
	Eastern division.	Central division.	Western division.	Recruit depots.	Independent stations.	Maneuver camps.	General hospitals.	Total.	Races.		Eastern division.	Central division.	Western division.	Recruit depots.	Independent stations.	Maneuver camps.	General hospitals.	Total.	Races.	
									White.	Colored.									White.	Colored.
1. Alkoholismus acutus, including delirium tremens	410	199	275	67	20	61	20	1,052	1,027	25	23.74	15.39	27.58	13.19	13.82	7.66	34.01	19.04	19.63	8.52
2. Appendicitis, typhlitis, perityphlitis	74	66	63	39	8	58	23	331	315	16	4.29	5.10	6.32	7.68	5.53	7.29	39.12	5.99	6.02	5.46
3. Bronchitis acuta	419	401	384	319	37	186	16	1,762	1,648	114	24.27	31.01	38.52	62.81	25.57	23.37	27.21	31.90	31.51	38.87
4. Cholera asiatica																				
5. Cholera nostras	1							1	1		.06							.02	.02	
6. Diphtheria et croup	6	26	3	6	1	1		43	41	2	.35	2.01	.30	1.18	.69	.13		.78	.78	.68
7. Dysenteria	27	26	9	13	2	32	4	113	109	4	1.56	2.01	.90	2.56	1.38	4.02	6.80	2.05	2.08	1.36
8. Erysipelas	2	12	3	11	1	11	1	41	39	2	.12	.93	.30	2.17	.69	1.38	1.70	.74	.75	.68
9. Febris intermittens (malaria) [1]	429	66	75	75	25	80	3	753	751	2	24.84	5.10	7.52	14.77	17.28	10.05	5.10	13.64	14.36	.68
10. Febris recurrens																				
11. Fractura ossium	161	172	151	39	16	93	5	637	609	28	9.32	13.30	15.15	7.68	11.06	11.69	8.50	11.53	11.64	9.55
12. Gonorrhea	1,377	1,436	787	883	55	626	57	5,221	4,942	279	79.75	111.06	78.94	173.85	38.01	78.65	96.94	94.52	94.48	95.12
13. Hernia	55	40	33	65	7	37	3	240	233	7	3.19	3.09	3.31	12.80	4.84	4.65	5.10	4.35	4.45	2.39
14. Influenza	342	165	379	143	86	55	9	1,179	1,166	13	19.81	12.76	38.02	28.16	59.43	6.91	15.31	21.34	22.29	4.43
15. Insolatio (Hitzschlag coup de chaleur)	4					5		9	9		.23					.63		.16	.17	
16. Luxationes articulorum	47	43	32	17	3	29	3	174	161	13	2.72	3.33	3.21	3.35	2.07	3.64	5.10	3.15	3.08	4.43
17. Meningitis cerebrospinalis epidemica		2						2	2			.15						.04	.04	
18. Morbilli	84	126	118	543	11	215	4	1,101	1,097	4	4.86	9.74	11.84	106.91	7.60	27.01	6.80	19.93	20.97	1.36
19. Parotitis epidemica	130	126	154	126	2	188	31	757	749	8	7.53	9.74	15.45	24.81	1.38	23.62	52.72	13.70	14.32	2.73
20. Pleuritis	42	38	25	19	2	23	2	151	136	15	2.43	2.94	2.51	3.74	1.38	2.89	3.40	2.73	2.60	5.11
21. Pneumonia crouposa sive lobaris	29	24	18	18	6	12	2	109	106	3	1.68	1.86	1.81	3.54	4.15	1.51	3.40	1.97	2.03	1.02
22. Rheumatismus articulorum	120	155	121	65	10	94	13	578	539	39	6.95	11.99	12.14	12.80	6.91	11.81	22.11	10.47	10.30	13.30
23. Scarlatina	1	4		2				7	7		.06	.31		.39				.13	.13	
24. Scorbutus			3					3	3				.30					.05	.06	
25. Syphilis	866	542	288	408	23	264	56	2,447	2,371	76	50.15	41.92	28.89	80.33	15.89	33.17	95.24	44.30	45.33	25.91
26. Trachoma		1	3	19		1		24	24			.08	.30	3.74		.13		.43	.46	
27. Tuberculosis pulmonum [2]	43	27	45	15	1	22	21	174	164	10	2.49	2.09	4.51	2.95	.69	2.76	35.71	3.15	3.14	3.41
28. Tuberculosis ceterorum organorum	8	12	7	5		6	3	41	35	6	.46	.93	.70	.98		.75	5.10	.73	.67	2.05
29. Typhus abdominalis	15	8	2	10	1	6	2	44	43	1	.87	.62	.20	1.97	.69	.75	3.40	.80	.82	.34
30. Typhus exanthematicus																				
31. Ulcus molle	464	400	141	134	6	232	6	1,383	1,319	64	26.87	30.94	14.14	26.38	4.15	29.15	10.20	25.04	25.22	21.82
32. Variola			1	2		1		4	4				.10	.39		.13		.07	.08	
33. Morbi auris	73	88	60	102	4	82	9	418	415	3	4.23	6.81	6.02	20.08	2.76	10.30	15.31	7.57	7.93	1.02

[1] Malaria fever, intermittent only.

[2] Includes tuberculosis of the larynx.

TABLE NO. 75.—*Showing the most important diseases, by divisions, in the United States, continental (excluding Alaska), year 1911—Enlisted men*—Continued.

Diseases.	Admissions—absolute numbers.										Proportionate numbers—admissions per 1,000 of mean strength.									
	Eastern division.	Central division.	Western division.	Recruit depots.	Independent stations.	Maneuver camps.	General hospitals.	Total.	Races.		Eastern division.	Central division.	Western division.	Recruit depots.	Independent stations.	Maneuver camps.	General hospitals.	Total.	Races.	
									White.	Colored.									White.	Colored.
34. Morbi cordis [1]	27	13	23	23	4	18	5	113	103	10	1.56	1.01	2.31	4.53	2.76	2.26	8.50	2.04	1.97	3.41
35. Morbi cutis [2]	364	181	230	381	26	124	9	1,315	1,278	37	21.08	14.00	23.07	75.01	17.97	15.58	15.31	23.81	24.43	12.61
36. Morbi mentis [3]	23	27	17	6	2	15	3	93	85	8	1.33	2.09	1.71	1.18	1.38	1.88	5.10	1.68	1.63	2.73
37. Morbi oculi	148	134	99	105	23	73	5	587	560	27	8.57	10.36	9.93	20.67	15.89	9.17	8.50	10.63	10.70	9.21
38. Morbi systemat urin. et sexual (excluding venerie et syphilis)	189	166	105	121	11	55	10	657	603	54	10.95	12.84	10.53	23.82	7.60	6.91	17.01	11.89	11.53	18.41

[1] Includes pericarditis and endocarditis.

[2] Diseases of the skin proper only.

[3] Insanity only.

TABLE NO. 76.—*Comparative figures, Army, by years, 1907–1911.*

ABSOLUTE NUMBERS.

Army.	Mean strength.	Admissions to sick report.		Discharges on certificates of disability.		Deaths.		Total losses.		Total days.				Constantly noneffective.			
		From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.		From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
										Total.	In hospital.	Total.	In hospital.	Total.	In hospital.	Total.	In hospital.
1911.....	72,748	68,073	39,364	1,011	799	348	181	1,359	980	883,646	798,382	465,853	426,534	2,420.95	2,187.35	1,276.31	1,195.98
1910.....	71,534	67,940	39,754	1,067	776	320	165	1,327	941	938,210	850,301	483,979	442,868	2,570.44	2,329.59	1,325.97	1,243.34
1909.....	74,319	79,060	46,869	1,270	918	370	221	1,640	1,139	1,125,333	994,411	597,032	534,125	3,083.10	2,724.41	1,635.70	1,463.36
1908.....	65,406	77,704	46,110	1,248	928	414	247	1,662	1,195	1,021,690	888,590	566,864	502,635	2,791.50	2,427.84	1,548.81	1,373.32
1907.....	58,803	65,546	39,774	1,107	865	319	177	1,426	982	906,750	781,140	512,030	453,791	2,484.25	2,140.10	1,402.82	1,243.36

TABLE NO. 76.- *Comparative figures, Army, by years, 1907–1911*—Continued.

PROPORTIONAL NUMBERS.

Army.	Mean strength.	Ratios per 1,000 of mean strength.												Average number of days lost.			
		Admissions to sick report.		Discharges on certificate of disability.		Deaths.		Total losses.		Noneffective from sickness.				From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
		From all causes.	Excluding injuries, vaccinia, venereal diseases, and alcoholism.	From all causes.	Excluding injuries, vaccinia, venereal diseases, and alcoholism.	From all causes.	Excluding injuries, vaccinia, venereal diseases, and alcoholism.	From all causes.	Excluding injuries, vaccinia, venereal diseases, and alcoholism.	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.		For each soldier.	For each case.	For each soldier.	For each case.
										Total.	In hospital.	Total.	In hospital.				
1911	72,748	935.74	541.10	13.85	10.94	4.77	2.48	18.62	13.42	33.28	30.07	17.54	16.06	12.15	12.98	6.40	11.83
1910	71,534	949.76	555.74	14.02	10.81	4.46	2.30	18.48	13.11	35.93	32.57	18.53	16.96	13.12	13.81	6.77	12.17
1909	74,319	1,002.99	629.84	16.84	12.18	4.91	2.93	21.75	15.11	41.48	36.66	22.01	19.69	15.14	14.24	8.03	12.75
1908	65,406	1,188.03	704.98	18.48	13.75	6.13	3.21	24.61	16.96	42.68	37.12	23.68	21.60	15.62	13.15	8.67	12.29
1907	53,803	1,218.26	739.25	20.15	14.65	5.81	3.22	25.96	17.87	46.17	39.78	26.08	23.11	16.85	13.83	9.52	12.87

INTERNATIONAL MILITARY MEDICAL STATISTICS FOR THE YEAR 1911.

The following tables are those agreed upon at the International Commission for the Unification of the Medical Statistics of Armies, held at Budapest in 1894, at Madrid in 1903, and modified by the last meeting held at Berlin in 1907. They are calculated for the United States Army proper (white and colored) and include enlisted men only. Dispositions include cases remaining from last year. Deaths include suicides and accidents. Days lost include those lost this year by cases remaining from last year.

Table I shows in absolute numbers, by divisions, the mean strength of the command, the admissions to quarters, to hospital, and total admissions; the disposition of the sick, total, and the number returned to duty, died, and otherwise disposed of, and the total number of days of sickness.

Table II gives the same data in ratios per 1,000, and also shows the days lost per soldier and per admission.

Table III shows, by arms of service, the mean strength, the total admissions, and those to hospital only, the total dispositions, and the number of those returned to duty, and the number that died.

Table IV gives the same data as Table III by months.

Table V shows for each of the larger garrisons the mean strength, admissions to hospital, total admissions, and the deaths.

Table VI shows for each of the 38 diseases or disease groups agreed upon by the International Commission the number remaining under treatment at the commencement and close of the current year, the admissions and dispositions for the year, the total sick days, and the average number of days per case.

Table VII shows the admissions, by arms of service, for the diseases and disease groups referred to in Table VI.

Table VIII shows the same data as Table VII by months.

Table IX shows deaths by rank, by length of service, and by age.

Table X shows the same data as Table IX for discharges for physical disability.

INTERNATIONAL TABLE I.—*Movement of sick by Army corps (divisions)—Absolute numbers.*

Department.	Mean strength.	Admitted sick.			Sick disposed of.				Total days sick.
		Total.	To hospital.	To quarters.	Returned to duty (recovered).	Died.	Otherwise disposed of.	Total.	
United States (excluding Alaska):									
Eastern Division	17,267	12,721	10,641	2,080	12,314	61	216	12,591	133,847
Central Division	12,930	10,434	9,644	790	11,295	69	310	11,674	165,435
Western Division	9,970	8,656	5,361	3,295	6,599	38	98	6,735	74,599
Recruit depots	5,079	8,750	7,871	879	8,186	45	717	8,948	90,999
Independent stations	1,447	1,043	563	480	1,026	6	12	1,044	9,330
Maneuver camps	7,959	6,850	873	5,977	5,251	14	61	5,326	41,180
General hospitals	588	588	557	31	2,702	29	468	3,199	117,673
Total	55,240	49,042	35,510	13,532	47,373	262	1,882	49,517	633,063
Alaska	1,119	468	355	113	440	7	7	454	5,369
Canal Zone, Panama	204	192	71	121	169	1	.....	170	1,909
Porto Rico	17	5	4	1	5	.....	.....	5	25
Hawaii	2,014	2,176	1,867	309	2,091	6	68	2,165	32,726
Philippines Division	12,454	15,172	13,277	1,895	14,590	66	503	15,159	196,140
Army transports	1,700	1,018	994	24	791	6	10	807	14,414
Army	72,748	68,073	52,078	15,995	65,459	348	2,470	68,277	883,646

INTERNATIONAL TABLE II.—*Movement of sick by Army corps (divisions)—Proportionate numbers.*

Department.	In 1,000 of mean strength.			In 1,000 disposed of.			Days lost.	
	Total admissions.	Admissions to hospitals.	Deaths	Returned to duty (recovered).	Died.	Otherwise disposed of.	Per soldier.	Per admission.
United States (excluding Alaska):								
Eastern Division	736.72	616.26	3.53	978.00	4.84	17.16	7.75	10.52
Central Division	806.96	745.86	5.34	967.53	5.91	26.56	12.79	15.85
Western Division	868.20	537.71	3.81	979.81	5.64	14.56	7.48	8.62
Recruit depots	1,722.78	1,549.71	8.86	914.84	5.03	80.13	17.92	10.40
Independent stations	720.80	389.08	4.15	982.76	5.75	11.49	6.45	8.95
Maneuver camps	860.66	109.69	1.76	985.92	2.63	11.45	5.17	6.01
General hospitals	1,000.00	947.28	.....	844.64	9.07	146.29	.....	.....
Total	887.80	642.83	4.72	956.70	5.29	38.01	11.46	12.91
Alaska	418.23	317.24	6.26	969.16	15.42	15.42	4.80	11.47
Canal Zone, Panama	941.18	348.04	4.90	994.12	5.88	.....	9.36	9.94
Porto Rico	294.12	235.30	.....	1,000.00	.....	.....	1.47	5.00
Hawaii	1,080.44	927.01	2.98	965.82	2.77	31.41	16.25	15.04
Philippines Division	1,218.24	1,066.08	5.30	962.46	4.35	33.18	15.75	12.93
Army transports	598.83	584.71	3.53	980.18	7.43	12.39	8.48	14.16
Army	935.74	715.87	4.77	958.73	5.10	36.18	12.15	12.98

INTERNATIONAL TABLE III.—*Movement of sick, by arms of service.*

Arms of service.	Mean strength.	Absolute numbers.					Proportionate numbers.				
		Sick admissions.		Sick disposed of.			Per 1,000 of mean strength.			Per 1,000 of sick disposed of.	
		Total.	To hospital.	Total.	Fit for duty (recovered).	Deaths.	Total sick admissions.	Admissions to hospital.	Deaths.	Fit for duty (recovered).	Deaths.
Infantry	23,493	19,724	14,806	19,744	18,882	121	839.57	630.23	5.15	956.34	6.13
Cavalry	11,969	13,082	9,806	13,028	12,561	56	1,092.99	819.22	4.68	964.15	4.30
Coast Artillery	17,289	14,577	10,483	14,770	14,249	60	843.18	606.34	3.47	964.72	4.06
Field Artillery	4,744	5,166	4,258	5,194	4,971	21	1,088.95	897.56	4.43	957.07	4.04
Engineers	1,812	1,776	1,009	1,802	1,719	14	980.13	556.84	7.73	953.94	7.77
Ordnance	716	523	174	534	515	5	730.45	243.02	6.98	964.42	9.36
Signal Corps	1,189	897	580	892	845	4	754.42	487.80	3.36	947.31	4.48
Hospital Corps	3,435	2,324	1,992	2,324	2,199	12	676.57	579.92	3.49	946.21	5.16
Others	8,101	10,009	8,970	9,989	9,518	55	1,234.30	1,107.27	6.79	952.85	5.51
Total	72,748	68,073	52,078	68,277	65,459	348	935.74	715.87	4.77	958.73	5.10

Ratios for deaths based on mean strength present and absent; total, 73,023.

INTERNATIONAL TABLE IV.—*Movement of sick, by months.*

AMERICAN TROOPS AT HOME.

Month.	Mean strength.	Absolute numbers.				Proportionate numbers.				
		Sick admissions.		Sick disposed of.			Per 1,000 of mean strength.			Per 1,000 sick disposed of.	
		Total.	To hospital.	Total.	Fit for duty (recovered).	Deaths.	Total sick admissions.	Admissions to hospital.	Deaths.	Fit for duty (recovered).	Deaths.
January	55,304	4,914	4,166	4,778	4,556	23	88.85	75.33	0.42	953.54	4.81
February	54,782	4,435	3,616	4,387	4,202	24	80.96	66.01	.44	957.83	5.47
March	55,203	4,636	3,098	4,814	4,584	32	83.98	56.12	.58	952.22	6.65
April	55,156	4,417	2,630	4,638	4,465	23	80.08	47.68	.42	962.70	4.96
May	56,122	4,100	2,206	4,101	3,910	30	73.06	39.31	.53	953.43	7.32
June	55,345	3,700	2,153	3,831	3,647	20	66.85	38.90	.36	951.97	5.22
July	55,511	3,986	2,879	3,988	3,805	26	71.81	51.86	.47	954.11	6.52
August	56,951	3,876	2,932	3,888	3,745	12	68.06	51.48	.21	963.22	3.09
September	54,962	3,781	2,835	3,836	3,677	18	68.79	51.58	.33	958.55	4.69
October	55,260	3,644	2,765	3,710	3,558	22	65.94	50.04	.40	959.03	5.93
November	54,144	3,715	2,981	3,732	3,537	18	68.61	55.06	.33	947.75	4.82
December	54,138	3,838	3,249	3,814	3,687	14	70.89	60.01	.26	966.70	3.67
Total	55,240	49,042	35,510	49,517	47,373	262	887.80	642.83	4.72	956.70	5.29

AMERICAN TROOPS IN THE PHILIPPINE ISLANDS.

January	11,737	1,051	847	1,050	993	5	89.55	72.16	0.43	945.71	4.76
February	12,036	798	620	840	805	5	66.30	51.51	.42	958.33	5.95
March	11,994	1,062	902	1,013	963	7	88.54	75.20	.58	950.64	6.91
April	12,929	1,112	991	1,172	1,130	5	86.01	76.65	.39	964.16	4.27
May	12,165	1,285	1,143	1,204	1,154	6	105.63	93.96	.49	958.47	4.98
June	11,957	1,563	1,390	1,453	1,396	5	130.72	116.25	.42	960.77	3.44
July	12,470	1,506	1,357	1,612	1,559	2	120.77	108.82	.16	967.12	1.24
August	12,280	1,422	1,271	1,399	1,345	9	115.80	103.50	.73	961.40	6.43
September	12,217	1,365	1,182	1,418	1,375	1	111.73	96.75	.08	969.67	.71
October	12,029	1,395	1,239	1,383	1,340	7	115.97	103.00	.58	968.91	5.06
November	13,444	1,234	1,111	1,243	1,204	4	91.79	82.64	.30	968.62	3.22
December	14,188	1,379	1,224	1,372	1,326	10	97.19	86.27	.70	966.47	7.29
Total	12,454	15,172	13,277	15,159	14,590	66	1,218.24	1,066.08	5.30	962.46	4.35

INTERNATIONAL TABLE V.—*Movement of sick in the larger garrisons.*

Garrisons.	Mean strength.	Total admissions.		Admissions to hospital.		Deaths.	
		Absolute numbers.	Per 1,000 of mean strength.	Absolute numbers.	Per 1,000 of mean strength.	Absolute numbers.	Per 1,000 of mean strength.
Presidio of San Francisco, Cal	2,028	2,183	1,076.44			2	0.99
Fort Riley, Kans	1,901	1,113	585.48	1,031	542.35	5	2.63
Fort D. A. Russell, Wyo	1,713	1,795	1,047.87	1,710	998.25	10	5.84
Fort Sam Houston, Tex	1,687	1,492	884.41	1,431	848.25	22	13.04
Fort Leavenworth, Kans	1,369	1,002	731,92	880	642.80	6	4.38
Columbus Barracks, Ohio	1,295	2,678	2,067.95	2,617	2,020.85	24	18.53
Fort Slocum, N. Y	1,254	2,714	2,164.28	2,496	1,990.43	3	2.39
Jefferson Barracks, Mo	1,229	1,402	1,140.77	1,361	1,107.40	13	10.58
Fort Monroe, Va	1,178	900	764.00	770	653.65	1	.85
Fort Sheridan, Ill	1,165	738	633.48	654	561.38	3	2.58
Vancouver Barracks, Wash	1,047	998	953.20	847	808.98	6	5.73
Fort Ethan Allen, Vt	826	654	791.77	622	753.03	6	7.26
Fort McDowell, Cal	818	994	1,215.16	722	882.64	4	4.89
Presidio of Monterey, Cal	811	725	893.96	612	754.62	5	6.17
Plattsburg Barracks, N. Y	810	433	534.57	392	483.95		
Fort Myer, Va	686	427	622.45	413	602.04	3	4.37
Washington Barracks, D. C	658	497	755.32	1	1.52		
Fort McKinley, Me	655	352	537.40	300	458.02	3	4.58
Fort Totten, N. Y	655	382	583.21	321	490.08	1	1.53
Fort Worden, Wash	644	227	352.48	216	335.40	1	1.55
Fort Hancock, N. J	610	336	550.82	305	500.00	3	4.92
Fort William H. Seward, Alaska	339	116	342.18	90	265.49	1	2.95
Fort Gibbon, Alaska	281	118	419.93	74	263.35	1	3.56
Fort Liscum, Alaska	194	112	577.32	90	463.91	2	10.31
Fort St. Michael, Alaska	152	50	328.95	45	296.05	1	6.58
Fort Davis, Alaska	146	68	465.75	48	328.76	2	13.70
Schofield Barracks, Hawaii	1,467	1,638	1,116.56	1,378	939.33	4	2.73
Fort Shafter, Hawaii	299	271	906.35	234	782.61	1	3.34
Fort Ruger, Hawaii	200	170	850.00	108	540.00	1	5.00
Fort De Russy, Hawaii	152	165	1,085.53	143	940.79	1	6.58
Fort William McKinley, P. I	2,887	3,438	1,190.85	3,218	1,114.65	17	5.89
Fort Mills, P. I	1,732	1,876	1,083.14	1,482	855.66	5	2.89
Camp Stotsenburg, P. I	1,201	2,380	1,981.68	2,183	1,817.65	6	5.00
Camp Keithley, P. I	1,036	733	707.53	686	662.16	7	6.76
Augur Barracks, P. I	1,024	1,122	1,095.70	1,043	1,018.55	14	13.67
Camp Jossman, P. I	851	995	1,169.21	908	1,066.98		
Camp McGrath, P. I	834	1,232	1,477.22	747	895.68	2	2.40
Camp Gregg, P. I	698	268	383.95	224	320.91	2	2.87
Ludlow Barracks, P. I	543	454	836.10	430	791.90	1	1.84
Cuartel de Espana, P. I	539	658	1,220.78	482	894.25	2	3.71
Pettit Barracks, P. I	488	299	612.70	288	590.16	4	8.20
Warwick Barracks, P. I	468	545	1,164.53	518	1,106.84	2	4.27
Camp Connell, P. I	450	283	628.89	279	620.00	1	2.22
Davao, P. I	373	319	855.23	302	809.65	3	8.04
Camp Overton, P. I	309	305	987.06	278	899.68	3	9.71
Regan Barracks, P. I	308	321	1,042.21	315	1,022.73		

INTERNATIONAL TABLE VI.—*Movement of sick according to most important diseases.*

Number of international nomenclature.	Diseases of the international nosological table.	Absolute numbers.									Proportionate numbers.					
		Remaining at close of 1910.	Admitted in 1911.	Total remaining and admitted.	Disposed of in 1911.			Remaining at close of 1911.	Total days sick in 1911.	Per 1,000 of mean strength.		Per 1,000 disposed of.			Average days of treatment.
					Fit for duty.	Died.	Otherwise.	Total.			Admissions.	Deaths.	Fit for duty.	Died.	Otherwise.	
1	Alkoholismus acutus, including delirium tremens	14	1,421	1,435	1,382	3	29	1,414	22	6,004	19.53	0.04	977.37	2.12	20.51	4.23
2	Appendicitis, typhlitis, and perityphlitis	44	453	497	431	6	24	461	38	12,398	6.23	.08	934.93	13.01	52.06	27.37
3	Bronchitis acuta	40	2,149	2,189	2,147	.....	18	2,165	26	13,503	29.54	.....	991.69	.....	8.31	6.28
4	Cholera Asiatica	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5	Cholera nostras	.....	1	1	1	.....	.....	1	.....	22	.01	.....	1,000.00	.....	.....	22.00
6	Diphtheria et croup	2	46	48	31	.....	5	36	12	1,003	.63	.....	861.11	.....	138.89	21.80
7	Dysenteria	26	302	328	293	1	15	309	19	7,144	4.15	.01	948.22	3.24	48.54	23.65
8	Erysipelas	5	43	48	45	.....	4	49	.....	790	.59	.....	918.37	.....	81.63	18.37
9	Febris intermittens (malaria) [1]	22	1,465	1,487	1,422	1	27	1,450	37	11,313	20.14	.01	980.69	.69	18.62	7.72
10	Febris recurrens	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11	Fractura ossium	91	816	907	756	21	63	840	91	34,619	11.22	.29	900.00	25.00	75.00	42.43
12	Gonorrhea	408	7,333	7,741	7,008	.....	357	7,365	377	138,585	100.80	.....	951.53	.....	48.47	18.90
13	Hernia	18	306	324	264	.....	34	298	27	10,644	4.20	.....	885.91	.....	114.09	34.78
14	Influenza	46	1,201	1,247	1,223	.....	15	1,238	10	6,750	16.51	.....	987.88	.....	12.12	5.62
15	Insolatio (Hitzschlag coup de chaleur)	.....	11	11	11	.....	.....	11	.....	74	.15	.....	1,000.00	.....	.....	6.73
16	Luxationes articulorum	11	213	224	209	1	6	216	10	3,288	2.93	.01	967.59	4.63	27.78	15.44
17	Meningitis cerebrospinalis epidemica	.....	4	4	1	3	.....	4	.....	127	.05	.04	250.00	750.00	.....	31.45
18	Morbilli	2	1,258	1,260	1,114	25	69	1,208	52	23,353	17.29	.34	922.19	20.70	57.12	18.57
19	Parotitis epidemica	10	1,052	1,062	999	.....	33	1,032	33	17,105	14.46	.....	968.02	.....	31.98	16.26
20	Pleuritis	8	195	203	183	3	10	196	8	5,536	2.68	.04	933.67	15.31	51.02	28.39
21	Pneumonia crouposa sive lobaris	18	127	145	109	20	7	136	11	4,394	1.75	.27	801.47	147.06	51.47	34.60
22	Rheumatismus articulorum	46	693	739	652	.....	50	702	35	17,717	9.53	.....	928.77	.....	71.23	25.57
23	Scarlatina	3	7	10	9	.....	1	10	.....	287	.10	.....	900.00	.....	100.00	41.00
24	Scorbutus	.....	3	3	3	.....	.....	3	.....	53	.04	.....	1,000.00	.....	.....	17.67
25	Syphilis	197	3,574	3,771	3,467	7	114	3,588	180	79,812	49.13	.10	966.27	1.95	31.77	22.33
26	Trachoma	1	27	28	22	.....	4	26	2	564	.37	.....	846.15	.....	153.84	20.89
27	Tuberculosis pulmonum [2]	103	228	331	31	21	206	258	77	32,686	3.13	.29	120.15	81.40	798.45	143.36
28	Tuberculosis ceterorum organorum	14	44	58	21	11	21	53	5	3,254	.60	.15	396.23	207.55	396.23	73.95
29	Typhus abdominalis	36	57	93	67	7	8	82	10	4,989	.78	.10	817.07	85.37	97.56	87.53
30	Typhus exanthematicus	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
31	Ulcus molle	122	2,561	2,683	2,422	.....	84	2,506	178	50,940	35.20	.....	966.47	.....	33.53	19.89
32	Variola	2	5	7	6	.....	.....	6	1	189	.07	.....	1,000.00	.....	.....	37.80
33	Morbi auris	23	575	598	541	.....	34	575	23	9,673	7.90	.....	940.87	.....	59.13	16.82

[1] Malarial fever, intermittent only.

[2] Includes tuberculosis of the larynx.

INTERNATIONAL TABLE VI.—*Movement of sick according to most important diseases*—Continued.

Number of international nomenclature.	Diseases of the international nosological table.	Absolute numbers.								Proportionate numbers.					
		Remaining at close of 1910.	Admitted in 1911.	Total remaining and admitted.	Disposed of in 1911.				Remaining at close of 1911.	Total days sick in 1911.	Per 1,000 of mean strength.		Per 1,000 disposed of.			Average days of treatment.
					Fit for duty.	Died.	Otherwise.	Total.			Admissions.	Deaths.	Fit for duty.	Died.	Otherwise.	
34	Morbi cordis [1]	16	139	155	77	21	49	147	13	4,968	1.90	0.29	523.81	142.86	333.33	35.74
35	Morbi cutis [2]	35	1,823	1,858	1,796	.....	27	1,823	34	15,206	25.06	.....	985.19	.....	14.81	8.34
36	Morbi mentis [3]	24	126	150	13	.....	113	126	32	11,270	1.73	.....	103.17	.....	896.83	89.44
37	Morbi oculi	37	797	834	775	.....	34	809	25	9,673	10.96	.....	957.98	.....	42.03	12.14
38	Morbi systemat. urin. et sexual (excluding venerie et syphilis)	42	931	973	851	13	64	928	45	15,656	12.80	.18	917.03	14.01	68.97	16.82

[1] Includes pericarditis and endocarditis.

[2] Includes diseases of the skin proper.

[3] Includes insanity only.

INTERNATIONAL TABLE VII.—*Most important diseases, by arms of service.*

No. international nomenclature.	Diseases of the international nosological table.	Absolute numbers—admissions by arms of service.									Proportionate numbers—admissions per 1,000 of mean strength.								
		Infantry.	Cavalry.	Coast Artillery.	Field Artillery.	Engineers.	Ordnance.	Signal Corps.	Hospital Corps.	Others.	Infantry.	Cavalry.	Coast Artillery.	Field Artillery.	Engineers.	Ordnance.	Signal Corps.	Hospital Corps.	Others.
1	Alkoholismus acutus, including delirium tremens	536	144	439	42	24	25	33	86	92	22.81	12.03	25.39	8.85	13.25	34.92	27.76	25.03	11.36
2	Appendicitis, typhlitis, and perityphlitis	125	82	98	29	18	1	4	48	48	5.32	6.85	5.67	6.11	9.93	1.40	3.36	13.97	5.93
3	Bronchitis acuta	595	328	531	154	28	28	39	77	369	25.33	27.41	30.71	32.46	15.45	39.11	32.80	22.42	45.55
4	Cholera Asiatica	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5	Cholera nostras	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.06	.....	.....	.....	.....	.....	.....
6	Diphtheria et croup	19	5	3	3	3	1	.....	6	6	.81	.42	.17	.63	1.66	1.40	.....	1.75	.74
7	Dysenteria	116	30	30	6	10	.....	3	15	11	4.94	2.51	1.74	1.26	5.52	.....	2.52	4.37	1.36
8	Erysipelas	16	4	3	4	3	1	.....	1	11	.68	.33	.17	.84	1.66	1.40	.....	.29	1.36
9	Febris intermittens (malaria)[1]	338	346	370	119	145	3	7	36	101	14.39	28.91	21.40	25.08	80.02	4.19	5.89	10.48	12.47
10	Febris recurrens	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11	Fractura ossium	263	198	150	90	26	6	11	20	52	11.19	16.54	8.68	18.97	14.35	8.38	9.25	5.82	6.42
12	Gonorrhœa	2,397	1,355	1,503	626	165	15	84	245	943	102.03	113.21	86.94	131.96	91.06	20.95	70.65	71.33	116.41
13	Hernia	85	59	52	20	6	3	1	8	72	3.62	4.93	3.01	4.22	3.31	4.19	.84	2.33	8.89
14	Influenza	277	134	441	40	27	16	12	67	187	11.79	11.20	25.51	8.43	14.90	22.35	10.09	19.50	23.08
15	Insolatio (hitzschlag, coup de chaleur)	3	.....	7	1	.....	.....	.....	.....	.....	.13	.....	.40	.21	.....	.....	.....	.....	.....
16	Luxationes articulorum	61	47	58	10	8	.....	2	7	20	2.60	3.93	3.35	2.11	4.42	.....	1.68	2.04	2.47
17	Meningitis cerebrospinalis, epidemica	1	2	.....	.....	.....	.....	.....	.....	1	.04	.17	.....	.....	.....	.....	.....	.....	.12
18	Morbilli	295	77	158	49	14	1	7	35	622	12.56	6.43	9.14	10.33	7.73	1.40	5.89	10.19	76.78
19	Parotitis epidemica	379	123	168	77	22	.....	13	61	209	16.13	10.28	9.72	16.23	12.14	.....	10.93	17.76	25.80
20	Pleuritis	76	23	38	20	2	2	1	7	26	3.23	1.92	2.20	4.22	1.10	2.79	.84	2.04	3.21
21	Pneumonia crouposa sive lobaris	42	15	29	5	4	3	1	4	24	1.79	1.25	1.68	1.05	2.21	4.19	.84	1.16	2.96
22	Rheumatismus articulorum	279	99	126	38	22	10	13	28	78	11.88	8.27	7.29	8.01	12.14	13.97	10.93	8.15	9.63
23	Scarlatina	.....	1	1	1	.....	.....	.....	1	3	.....	.08	.06	.21	.....	.....	.....	.29	.37
24	Scorbutus	.....	.....	3	.....	.....	.....	.....	.....	.....	.....	.....	.17	.....	.....	.....	.....	.....	.....
25	Syphilis	1,177	607	796	231	101	17	57	167	421	50.10	50.71	46.04	48.70	55.74	23.74	47.94	48.62	51.97
26	Trachoma	5	3	.....	.....	.....	.....	.....	.....	19	.21	.25	.....	.....	.....	.....	.....	.....	2.35
27	Tuberculosis pulmonum[2]	69	28	56	16	6	.....	3	31	19	2.94	2.34	3.24	3.37	3.31	.....	2.52	9.03	2.35
28	Tuberculosis ceterorum organorum	13	8	8	7	.....	.....	3	1	4	.55	.67	.46	1.48	.....	.....	2.52	.29	.49
29	Typhus abdominalis	18	7	10	.....	5	1	1	4	11	.77	.58	.58	.....	2.76	1.40	.84	1.16	1.36
30	Typhus exanthematicus	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
31	Ulcus molle	915	611	475	271	54	3	22	64	146	38.95	51.05	27.48	57.13	29.80	4.19	18.50	18.63	18.02
32	Variola	1	1	.....	.....	.....	.....	.....	1	2	.04	.08	.....	.....	.....	.....	.....	.29	.25
33	Morbi auris	203	72	95	26	33	3	8	24	111	8.64	6.02	5.49	5.48	18.21	4.19	6.73	6.99	13.70
34	Morbi cordis[3]	46	21	24	11	2	4	1	8	22	1.96	1.75	1.39	2.32	1.10	5.59	.84	2.33	2.72
35	Morbi cutis[4]	469	260	452	119	45	19	17	33	409	19.96	21.73	26.14	25.08	24.83	26.54	14.30	9.61	50.49
36	Morbi mentis[5]	56	23	19	7	.....	.....	3	8	10	2.38	1.92	1.10	1.48	.....	.....	2.52	2.33	1.23
37	Morbi oculi	233	142	176	44	24	11	20	24	123	9.92	11.86	10.18	9.27	13.25	15.36	16.82	6.99	15.18
38	Morbi systemat. urin et sexual (excluding venerie et syphilis)	241	174	213	71	24	5	26	39	138	10.26	14.54	12.32	14.97	13.25	6.98	21.87	11.35	17.04

[1] Malarial fever, intermittent only. [2] Includes tuberculosis of the larynx. [3] Includes pericarditis and endocarditis. [4] Diseases of the skin proper only. [5] Insanity only.

INTERNATIONAL TABLE VIII.—*Most important diseases, by months.*

Number of international nomenclature.	Diseases of the international nosological table.	Admissions by months.											
		January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.
1	Alkoholismus acutus, including delirium tremens	120	115	123	127	105	107	123	128	135	101	105	132
2	Appendicitis, typhlitis, perityphlitis	38	34	43	33	39	37	34	36	43	36	43	37
3	Bronchitis acuta	333	263	301	194	147	106	112	99	123	157	169	145
4	Cholera Asiatica												
5	Cholera nostras								1				
6	Diphtheria et croup	8	4	3		1	1		1	1	3	5	19
7	Dysenteria	39	11	22	19	38	30	22	29	20	32	17	23
8	Erysipelas	3	7	14	3	6	1	2	2			2	3
9	Febris intermittens (malaria)	99	79	64	91	109	120	134	149	189	164	104	163
10	Febris recurrens												
11	Fractura ossium	54	54	70	63	67	73	78	68	75	66	78	70
12	Gonorrhea	621	560	603	537	571	536	637	655	649	650	677	637
13	Hernia	39	31	32	21	22	28	17	18	30	26	16	26
14	Influenza	350	258	218	77	37	21	26	18	22	56	70	48
15	Insolatio (Hitzschlag, coup de chaleur)					1	5	3	2				
16	Luxationes articulorum	14	20	17	13	11	22	17	25	23	10	23	18
17	Meningitis cerebrospinalis epidemica		1	1		1		1					
18	Morbilli	135	181	240	171	117	58	58	50	72	41	50	85
19	Parotitis epidemica	46	138	264	246	149	60	31	5	10	27	28	48
20	Pleuritis	13	16	23	17	25	16	20	12	15	14	10	14
21	Pneumonia crouposa sive lobaris	32	16	13	14	6	3	5	6	9	1	8	14
22	Rheumatismus articulorum	74	76	95	91	79	53	38	31	30	47	36	43
23	Scarlatina	1	1	3		1				1			
24	Scorbitus									1	1		1
25	Syphilis	222	255	315	263	256	312	333	383	289	289	343	314
26	Trachoma	2		3		6	2	3	1	2	3	1	4
27	Tuberculosis pulmonum	18	27	13	21	20	19	19	17	15	23	19	17
28	Tuberculosis ceterorum organorum	6	5	4	6	4	2	5	1	2	3	5	1
29	Typhus abdominalis	4	3	4	7	4	6	4	7	6	6	3	3
30	Typhus exanthematicus												
31	Ulcus molle	205	194	189	172	211	214	216	215	204	219	275	247
32	Variola	1	1			1					1		1
33	Morbi auris	53	50	51	39	46	53	52	46	64	47	36	38
34	Morbi cordis	13	12	12	7	14	18	13	13	6	10	8	13
35	Morbi cutis	144	140	160	148	140	160	173	171	162	129	157	139
36	Morbi mentis	10	12	5	13	13	7	11	13	8	11	13	10
37	Morbi oculi	69	56	76	71	108	70	68	61	49	58	53	58
38	Morbi systemat. urin et sexual (excluding venerie et syphilis)	68	68	65	79	72	74	66	88	97	82	84	88

INTERNATIONAL TABLE IX.—*Deaths, by rank, by length of service, and by age.*

Cause of death.	Total number of deaths (enlisted men).		Deaths by rank and length of service.				Deaths by age.					
	Absolute numbers.	Per 1,000 of mean strength.	Noncommissioned officers.	Soldiers in first year of service.	Soldiers in second year of service.	Soldiers in third year of service and beyond.	20 and under.	21 to 25.	26 to 30.	31 to 35.	36 to 40.	41 and over.
Deaths from sickness:												
Soldiers present with troops	132	1.81	35	48	8	41	16	41	22	23	14	16
Soldiers absent from troops	62	.85	25	14	2	21	5	17	12	14	5	9
Accidental deaths:[1]												
Soldiers present with troops	63	.86	14	9	8	32	2	22	17	8	6	8
Soldiers absent from troops	41	.56	5	6	....	30	....	14	15	7	3	2
Suicides:												
Soldiers present with troops	39	.53	13	7	3	16	....	12	9	6	3	9
Soldiers absent from troops	11	.15	4	3	1	3	....	5	1	1	1	3
Grand total	348	4.77	96	87	22	143	23	111	76	59	32	47

[1] Includes 25 homicides and killed in action.

INTERNATIONAL TABLE X.—*Discharges from the Army for physical disability, temporary or permanent, by rank, length of service, and by age.*

Cause of discharge.	Total discharges (enlisted men).		Rank and length of service.				Age.					
	Absolute numbers.	Per 1,000 of mean strength.	Noncommissioned officers.	Soldiers in first year of service.	Soldiers in second year of service.	Soldiers in third year of service and beyond.	20 and under.	21 to 25.	26 to 30.	31 to 35.	36 to 40.	41 and over.
Physical disability existent prior to enlistment	403	5.52	2	315	37	49	57	254	62	25	4	1
Physical disability incident to service	483	6.61	89	97	62	235	24	185	131	70	40	33
Physical disability not incident to service	125	1.71	8	46	16	55	5	56	33	15	8	8
Grand total	1,011	13.84	99	458	115	339	86	495	226	110	52	42

Very respectfully,

GEORGE H. TORNEY,
Surgeon General, U. S. Army.

The SECRETARY OF WAR.

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ANNUAL REPORTS, WAR DEPARTMENT

FISCAL YEAR ENDED JUNE 30, 1913

REPORT OF THE

SURGEON GENERAL

U. S. ARMY

TO THE SECRETARY OF WAR

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REPORT OF THE SURGEON GENERAL OF THE ARMY.

War Department,
Office of the Surgeon General,
Washington, August 30, 1913.

The Secretary of War.

Sir: I have the honor to submit herewith a report upon the work of the Medical Department, with a study of the health and sanitary conditions of the Army for the calendar year 1912, and a financial statement for the fiscal year ending June 30, 1913. I desire at this point to invite especial attention to certain points of interest in this report.

Constantly noneffective rates.

The constantly noneffective rate, which is a statement of the average number of men in each 1,000 incapacitated for duty by disease or injury each day during the year, is the true measure of the loss in efficiency of the Army from disease and injury. By reference to Chart A, which shows these rates for the American Army from 1867 to 1912, inclusive, it will be seen that the rate for 1912 was by far the lowest on record in this office, noneffective rates not being compiled prior to 1867. Chart B, giving this same rate for disease only for the American Army, shows that the rate for 1912 was exactly the same as that for 1895 and only slightly higher than that for 1896, the lowest on record for our Army. In considering these rates it must be borne in mind, however, that prior to the Spanish-American War in 1898 our troops were not exposed to such a large extent to diseases incident to exposure to tropical climates. The rates prior to 1898 were for the United States only, and in reality to show the true health conditions now as compared with that period the rates for the United States alone should be considered. This rate for disease in the United States in 1912 was 22.57 per 1,000, which is much lower than the corresponding lowest Army rate, 25.23, for 1896. For the United States, continental, the total rate for disease and injury was the lowest recorded. In 1912 there were 150 less men constantly sick than in 1911, although the average strength in 1912 was 3,134 more than in 1911.

In the Philippine Islands the noneffective rate for American troops, both for disease and injury, was higher in 1912 than in 1911. The rate for disease was 39.85 per 1,000, while in the United States it was, as stated above, 22.57. Thus is shown in a striking manner the effects of tropical service upon the efficiency of the Army. In this connection attention is invited to the remarks of the tropical board on page 130 relative to the effects of tropical climates. By reference to Chart H, page 29, it will be observed that Alaska maintained as usual its record of being by far the healthiest region where our troops are stationed.

Admission rates.

Chart C, page 23, shows in a striking way the admission rates for disease and injuries for the American Army from 1819 (the year this office was established as a bureau of the War Department) to 1912, inclusive. By reference to this chart it will be seen that the admission rate for the American Army for 1912 was 823.94, the lowest on record. The rate for disease alone was 674.29, also the lowest recorded. By reference to Chart M, page 42, it will be observed that this rate for disease for the United States, continental, was only 596.94 per 1,000. That for all causes was 738.70 per 1,000. These rates are very much better than any previous corresponding rates for the United States. In the Philippine Islands, however, due especially to an unusual prevalence of malarial fevers, the admission rate for disease in 1912 was higher than the corresponding rate in 1911. The rate for external causes showed a slight decrease. Chart H, page 29, shows in a striking way that the admission rate for the American troops was higher in the Philippine Islands than in any other country where our troops are stationed. It will also be noticed that Alaska had by far the lowest admission rate as well as the lowest noneffective rate.

Discharge for disability.

The good effects of General Order 174, War Department, 1909, continue to be shown in a constantly decreasing rate for discharge on certificates of disability. Not only are some cases found fit or rendered fit for duty by treatment at general hospitals and recruiting depots, where they are sent for discharge, but the fact that a board of medical officers must pass on each case has a deterring effect on post surgeons, who might be inclined in some cases to assist organization commanders to eliminate undesirable men from their organizations who are not really physically disqualified. Chart D, page 25, shows that the rate for discharges for all causes for the total American Army was for 1912 the lowest since the Spanish-American War. By reference to Charts F and N, pages 27 and 43, it will be observed that the same remarks are true for the rate for disease for the American Army and for all causes for the troops stationed in the United States, continental.

Deaths.

While the rate for noneffectiveness, admissions, and discharges have shown a satisfactory improvement from year to year, the death rate has also improved. Chart E, page 26, shows graphically that the death rate for all causes for the Army was lower in 1912 than in any previous year in the history of our Army, other than for the year 1910. However, by reference to Chart F, page 27, it will be seen that the death rate for disease for the American Army was lower in 1912 than in 1910, and was moreover lower than the corresponding rate for any year on record. Chart H, page 29, shows the comparative discharge and death rates for American troops for 1912 in all countries where our troops are stationed.

While the general rates just mentioned for 1912 were very satisfactory, the rates for certain special diseases are especially gratifying.

Typhoid fever.

On page 49 will be found a full discussion of the occurrence of typhoid fever among the American and native troops. Chart P, page 51, shows graphically the more than satisfactory result following the compulsory immunization of the Army by the typhoid prophylactic. In 1912 only

18 cases of this disease occurred in that part of the Army stationed in the United States; of these 18 cases only 6 had received the prophylactic, while 5 of them occurred in recruits who were infected prior to enlistment and were in the incubation stage when enlisted. Three deaths occurred in the United States, none of which were in the cases immunized. Among the American and native troops there were in all 27 cases with 4 deaths in 1912 as compared with 69 cases and 8 deaths in 1911, the results for 1911 being at that time considered more than satisfactory. It appears at the present time that the figures for 1913 will be even more gratifying than those for 1912. At this date, August 30, not a single case has been reported among the enlisted men in the entire Army, American or native troops, since October 27, 1912. One case occurred in a medical officer, December 19, 1912. This officer had had a previous attack of typhoid fever and hence had not received the prophylactic. It seems more than marvelous that among the number of men in the camps at Texas City and Galveston, and among those in the numerous camps along the Mexican border, constantly exposed to infection, not a single case has occurred. During the last few months cases have been reported in several instances among the members of families of officers or enlisted men or other civilians at Army posts without a case occurring among the military personnel.

Venereal diseases.

It is very gratifying to this office to be able to state that as a result of the propaganda of education in the Army, of compulsory prophylaxis, with physical examinations, and of the stoppage of pay by act of Congress of men incapacitated by these diseases for duty, some control has apparently at last been secured over the occurrence of venereal diseases. The order from the War Department prescribing the compulsory prophylaxis with semimonthly physical inspection was published in General Order 17, May 31, 1912. The act of Congress for the stoppage of pay was published by General Order 31, September 12, 1912. Thus only a part of the year was affected by these two measures. However, some beneficial results were obtained before these orders were issued by the actions of division and post commanders upon the recommendation of chief surgeons and post surgeons. The admission rate for the troops stationed in the United States for the year was very satisfactory, being 115.74 per 1,000, as compared with 145.29 per 1,000 in 1911. The rate for the first quarter of 1912 was 130 per 1,000, for the second 113, for the third 107, and for the fourth 91. Thus the beneficial effects of all the measures were shown toward the latter part of the year. The improvement in the noneffective rate was even more marked than that in the admission rate, this being only 5.96 per 1,000 in 1912, as compared with 8.82 for 1911. In the Philippine Islands the admission rate for the white troops showed a satisfactory improvement, but that for the colored troops was unusually high. The rate for the Army as a whole, both for noneffectiveness and admissions, showed a very satisfactory improvement. For the year 1913 the results will apparently be very much more satisfactory than even those for 1912. Thus, for the first six months in 1913 the annual admission rates for these diseases was 74.67 per 1,000. By reference to Chart T, page 65, it will be seen that this is the lowest rate for these diseases since 1895. It should be remarked, in passing, that this rate includes all cases

occurring, not only those excused from duty, but also all cases that were treated and recorded but not excused from any duty. Approximately one year after official action was taken by the War Department and by Congress, the admission rate for venereal diseases has been reduced about one-half. The rate in 1911 was 145.29 per 1,000; the annual rate for the first six months of 1913 was 74.67. It is believed that the time has come to hold commanding officers responsible for excessive venereal rates occurring at their posts, and especially for continued failure on the part of the men of the command to comply with the existing orders on the subject. If this were done and if the officers of the Inspector General's Department and the sanitary inspectors had orders to investigate strictly the results obtained at posts inspected by them, and to make special reports in cases where these results are not satisfactory, there is no doubt that a great and permanent improvement could be effected.

Tuberculosis.

While there is as yet no measure that can eradicate tuberculosis from the Army as the typhoid prophylactic has done for typhoid fever, nor control it as effectively as the present system of venereal prophylaxis is apparently controlling the occurrence of this class of disease, yet it is gratifying to be able to report that as the result of improved sanitation and of the care with which applicants for enlistment are examined, that the rate for this disease is steadily diminishing year by year. This is shown on Chart V, page 73.

Malarial fevers.

By reference to Chart U, page 69, it will be seen that the admission rate for malarial fevers in the United States continues to steadily diminish. Chart X, page 103, shows, however, that the admission rate for these fevers in the Philippine Islands was higher than it has been in any year since 1906. A full discussion of this subject will be found on pages 67 and 101.

Alcoholism.

Chart T, page 65, shows that the rate for alcoholism in the United States for 1912 is the lowest since 1873, excepting that for the year 1898, which should be omitted, as it was a year of war, when such rates are usually low. The rate for the American troops in the Philippine Islands also showed a satisfactory decrease. During the year 1913 it is expected that the full benefit of the act of Congress for the stoppage of pay will be manifested and that there will be a still more marked decrease.

Improved camp sanitation.

Finally it is being demonstrated day by day in the camps at Texas City and Galveston that troops properly protected by vaccination against smallpox and typhoid fever can live in camps properly located with the present system of camp sanitation for an indefinite length of time without any increased morbidity among the troops. The system of the disposal of all excreta and garbage in camps is not only very satisfactory but very simple and inexpensive.

Increase of Hospital Corps.

I can not in transmitting this, my last, annual report fail to call your attention to one particular in which the Medical Department is unprepared to fulfill its responsibilities to the Army and the Nation. It is one which has been the subject of frequent communications from this office in the last few years and has been pointed out for several years in the annual reports—this is the great deficiency in number of the Hospital Corps; so that when the tactical divisions of the

Regular Army take the field they can have not more than one-fourth of the sanitary units required for the medical service and called for by the Field Service Regulations. In fact the first division stationed in the Eastern Department has not a single sanitary unit. This matter is discussed quite fully on page 165 et seq. of this report. No action by Congress is necessary to remedy this defect, since Congress, in order that such a deficiency might be avoided, has placed in the hands of the President the responsibility for providing a sufficiently numerous Hospital Corps to care for the sick and wounded, and has specifically stated that they shall not be counted as a part of the strength of the Army. It is believed that Congress has thus shown the intention that our Army shall have an adequate medical service proportioned to its strength, and this is what I have repeatedly urged. It is also believed that if the Secretary would recommend to Congress the reorganization of the Hospital Corps, which is asked for in this report, it will be easily obtained and will much facilitate the recruitment of suitable men for this relatively unattractive service.

HEALTH OF THE ARMY.

International Nomenclature.

This is the first annual report of this office in which the diagnostic terms for diseases and injuries, adopted by the Medical Department in accordance with the International Nomenclature, are used with the international number. The nomenclature was published in C. M. M. D., December 7, 1911, for the information and guidance of all medical officers.

The International Nomenclature is used by most of the important foreign countries. It is also used by the Census Bureau in this country and by an increasing number of boards of health and large hospitals. It is reported that it will also be adopted by the American Medical Association.

In studying statistics for other countries, where the terms used are expressed in a foreign language, the International number furnish a ready key for their interpretation.

On page 286 and following will be found 10 tables giving the military statistics for the year 1912, as agreed upon at the International Commission for the Unification of the Medical Statistics of Armies, held at Budapest in 1894, at Madrid in 1903, and modified by the last meeting held at Berlin in 1907. The diagnostic terms and numbers used in these tables are those agreed upon by the commission, and are not to be confused with the terms and number of the International Nomenclature used in the remainder of this report and based upon the second decennial revision by the international commission held in Paris, July 1 to 3, 1909.

Admission Rates.

Prior to 1904 in compiling the statistics of this office for the Army all readmissions which were obviously for the same attack of the same disease were omitted. Thus if a man was admitted to hospital with a complication of gonorrhea, who had been returned to duty a short time before, after treatment for the same attack of this disease the readmission was not counted. From 1904 to 1911, inclusive (reports 1905–1912), all admissions were counted. In compiling the statistics for 1912 the rule followed prior to 1904 has been followed. In each report recently a table has been published showing for the Army the difference between the actual number of cases and admissions. In this report in making comparisons between cases and admissions the terms case admission (report 1913 and prior to the one for 1905) and total admission (reports 1905 to 1912, inclusive) will be used.

Table No. 81, page 285, shows the total admissions and case admission rates for the Army, for the United States, continental (exclusive of Alaska), and for American troops in the Philippine Islands for diseases, external causes, and all causes separately for each year, 1904 to 1911, inclusive.

OFFICERS.

The mean strength of officers was 4,216, as obtained from the reports of sick and wounded of the Medical Department, and 4,690 from the office of The Adjutant General. There were 2,516 admissions, 24 deaths, and 105.08 constantly noneffective from all causes, equal to ratios of 596.78, 5.12, and 24.92 as compared with ratios of 596.92, 4.43, and 26.91 per 1,000 for the year 1911. The constantly noneffective rate was lower than for 1911, the admission rate slightly lower, and the death rate higher.

The principal causes of admission in the order of their importance were bronchitis, 42.93; diseases of the pharynx, 38.19; influenza, 37.95; diarrhea and enteritis, 35.82; diseases of the nasal fossæ, 29.89; malarial fevers, 25.14; diseases of the stomach (cancer excepted), 20.87; and dengue, 19.21 per 1,000.

OFFICERS RETIRED.

Twenty-two officers were retired on account of disability during the year, making a rate for retirement for disability of 4.69 per 1,000, as compared with 6.64 for 1911. The discharge rate for disability in enlisted men was 13.43.

The following table shows the principal causes for which retirement were made and the rank and age of the officers retired:

TABLE No. 1.—*Retirement of officers, United States Army, year 1912, for disability, by causes and rank, grouped by ages.*

	Total.		Ages of officers, quinquennial groups.								
	Number.	Ratio per 1,000 of all officers.	24 years and under.	25 to 29 years.	30 to 34 years.	35 to 39 years.	40 to 44 years.	45 to 49 years.	50 to 54 years.	55 to 59 years.	60 years and over.
CAUSES OF RETIREMENT.											
Organic disease of heart	4	.85					1		2	1	
Deafness	3	.64						2	1		
Dysentery, amœbic	2	.43						1	1		
Tuberculosis, pulmonary	2	.43		1	1						
Paresis	2	.43					2				
Neurasthenia	2	.43				1	1				
Nephritis, chronic interstitial	2	.43						1		1	
Rheumatism, chronic articular	1	.21							1		
Arterio-sclerosis, general	1	.21									1
Cataract, both eyes	1	.21							1		
Inguinal hernia, bilateral	1	.21				1					
Fracture, leg	1	.21				1					
RANK IN SERVICE.											
Colonel	2	.43								2	
Lieutenant colonel	4	.85						2	2		
Major	2	.43							1		1
Captain	10	2.13			1	2	4	2	1		
First lieutenant	1	.21				1					
Second lieutenant	1	.21		1							
Chaplain	2	.43							2		
Number of retirements	22	4.69		1	1	3	4	4	6	2	1
Number of officers in service	4,690		288	951	960	1,064	630	368	215	142	72
Ration per 1,000 of each group				1.05	1.04	2.82	6.35	10.87	27.91	14.08	13.89

There were 24 deaths with a rate of 5.12 per 1,000, as compared with 20 deaths with a rate of 4.43 in 1911.

The following table shows the causes of deaths of officers:

TABLE NO. 2.—*Deaths of officers, United States Army, year 1912, by causes and rank, grouped by ages.*

	Total.		Ages of officers, quinquennial groups.								
	Number.	Ratio per 1,000 of all officers.	24 years and under.	25 to 29 years.	30 to 34 years.	35 to 39 years.	40 to 44 years.	45 to 49 years.	50 to 54 years.	55 to 59 years.	60 years and over.
CAUSES OF DEATH.											
Bright's disease	3	.64							1	2	
Organic disease of heart	2	.43						1		1	
Pneumonia	2	.43			1						1
Appendicitis	2	.43			1	1					
Gunshot wounds, suicidal	2	.43			1		1				
Crushing, by fall of aeroplane	2	.43		2							
Typhoid fever	1	.21					1				
Tuberculosis, pulmonary	1	.21						1			
Sarcoma of liver	1	.21						1			
Cancer of esophagus	1	.21									1
Diabetes	1	.21									1
Alcoholism, chronic	1	.21				1					
Embolism, cerebral	1	.21								1	
Sprue, chronic	1	.21								1	
Incised wounds by hostile Moros	1	.21				1					
Drowned at sea	1	.21						1			
Fracture of skull, fall from horse	1	.21		1							
RANK IN SERVICE.											
Brigadier general	1	.21								1	
Colonel	5	1.07								3	2
Lieutenant colonel	1	.21								1	
Major	6	1.28					1	3	1		1
Captain	3	.64				3					
First lieutenant	2	.43			2						
Second lieutenant	3	.64		3							
Chaplain	3	.64			1		1	1			
Number of deaths	24	5.12		3	3	3	2	4	1	5	3
Number of officers in service	4,690		288	951	960	1,064	630	368	215	142	72
Death rate per 1,000 of each group				3.15	3.13	2.82	3.17	10.87	4.65	35.21	41.67

TEST EXERCISES FOR FIELD OFFICERS.

Of the officers of field rank who were subject to the annual physical test, 7 were excused in 1912; in all 7 cases the disability was regarded as permanent.

ENLISTED MEN.

The mean enlisted strength of the Army, American troops, white and colored, for the year 1912, as reported on the monthly sick reports of the Medical Department, was 78,267, and on the returns of The Adjutant General's Office, 79,613. The former represents the strength of the commands from which the sick returns were made and was used in calculating all ratios except those for deaths and discharges. As all deaths and discharges were reported, even of those absent from a command, the total strength as obtained from The Adjutant General was used in calculating ratios pertaining to those headings. There was an increase in strength over the year 1911, for which the medical returns showed 72,748 and The Adjutant General's Office, 73,023.

During the year 1912 American troops were stationed in the United States proper, the Philippine Islands, China, Alaska, Hawaii, and the Canal Zone. Native troops served in Porto Rico and the Philippines.

Statistics for the native troops, Porto Rican and Philippine, have been separately compiled, and when reference is made to the "Army" in this report the American Army proper, white and colored troops, exclusive of native troops, is meant.

Charts, A, C, D, and E, were prepared in this office for the exhibit at the Fifteenth International Congress of Hygiene and Demography. They have been brought up to date and are published in this report so that they may be on permanent record. The corresponding historical table was published in the last report of this office, pages 14, 15, and 16, report 1912.

CONSTANTLY NONEFFECTIVE RATE.

Chart A shows the constant noneffective rate for all causes from the year 1867 to 1912, inclusive. This rate is the true measure of the loss in efficiency of the Army from sickness and injury. The rate for disease and injury obtained for the total American Army for the year 1912 was 30.10, as compared with 33.28 per 1,000 in 1911. The rate for 1912 is thus much lower than the rate for 1911, which was the lowest recorded noneffective rate in the history of the Army before the year 1912. In only two previous years has the noneffective rate for all causes been below 34. These years were 1895 and 1896, when the rates were 33.89 and 33.97, respectively.

Chart B, giving the total noneffective rate for diseases for the last 20 years, shows in a striking way the increase in sickness due to exposure to tropical climates, a condition subsequent upon the occupation of new territory during and since the Spanish-American War. It also shows a steady diminution in sickness after the first year of colonial expansion in 1898 with the steady advance in our knowledge of tropical disease and preventive medicine and the establishment of more sanitary conditions of living in our tropical possessions. It will be seen by reference to this chart that the rate for 1912 was exactly the same as for 1895, 25.43, and only slightly higher than the rate for 1896, which was 25.23. This noneffective rate for disease for 1896 is the lowest on record in the Army. The corresponding rate for 1911 was 28.23. The highest noneffective rate on record was for the year 1898, when the total rate was 82.83 per 1,000 and the rate for diseases alone was 69.09. The progressive improvement from 1898 to 1911 was chiefly due to the sanitary control of infectious diseases, malarial fevers, typhoid, and dysentery. The very marked improvement in 1912 was due, largely, to the sanitary control of two diseases, typhoid fever and venereal diseases. As a result of the control of typhoid fever by immunization of the Army by the typhoid prophylactic and by the employment of proper sanitary measures, this disease ceases, apparently, to be a factor worthy of consideration as far as noneffectiveness in the Army is concerned. The noneffective rate for venereal diseases showed a very material reduction in 1912; this was a result of the propaganda of education which has been going on for several years and of General Order 17, War Department, May 31, 1912, prescribing a compulsory system of venereal prophylaxis and

Chart A.

Noneffective Rates, All Causes, for the Army, years, 1867–1912.

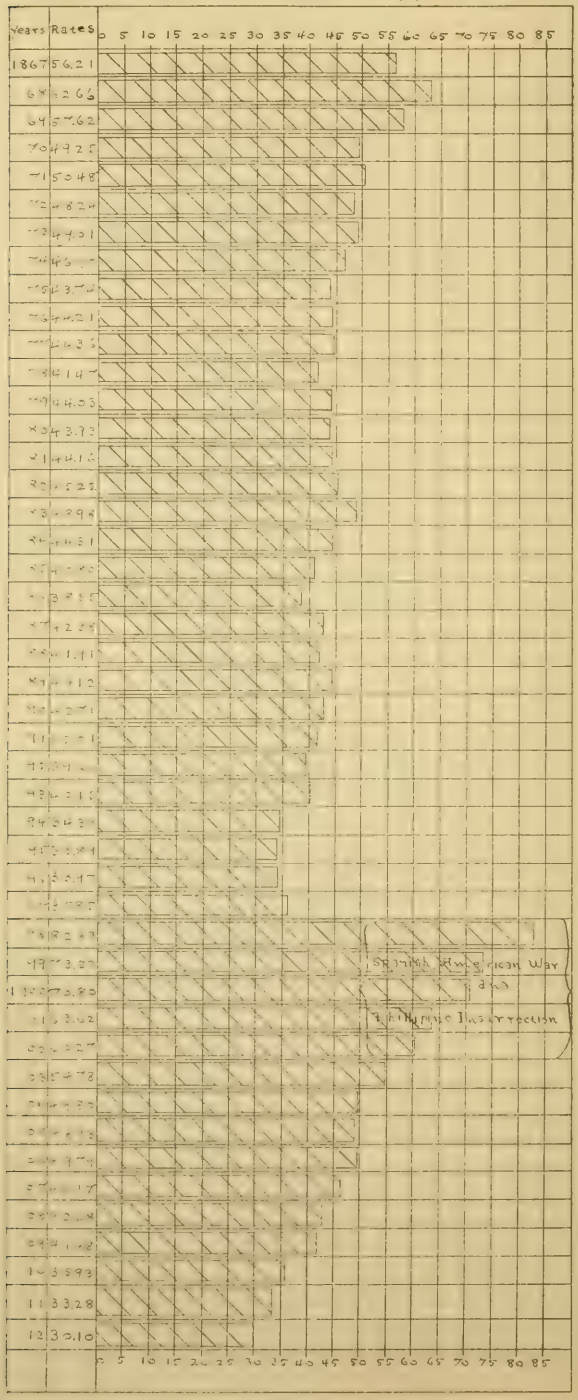
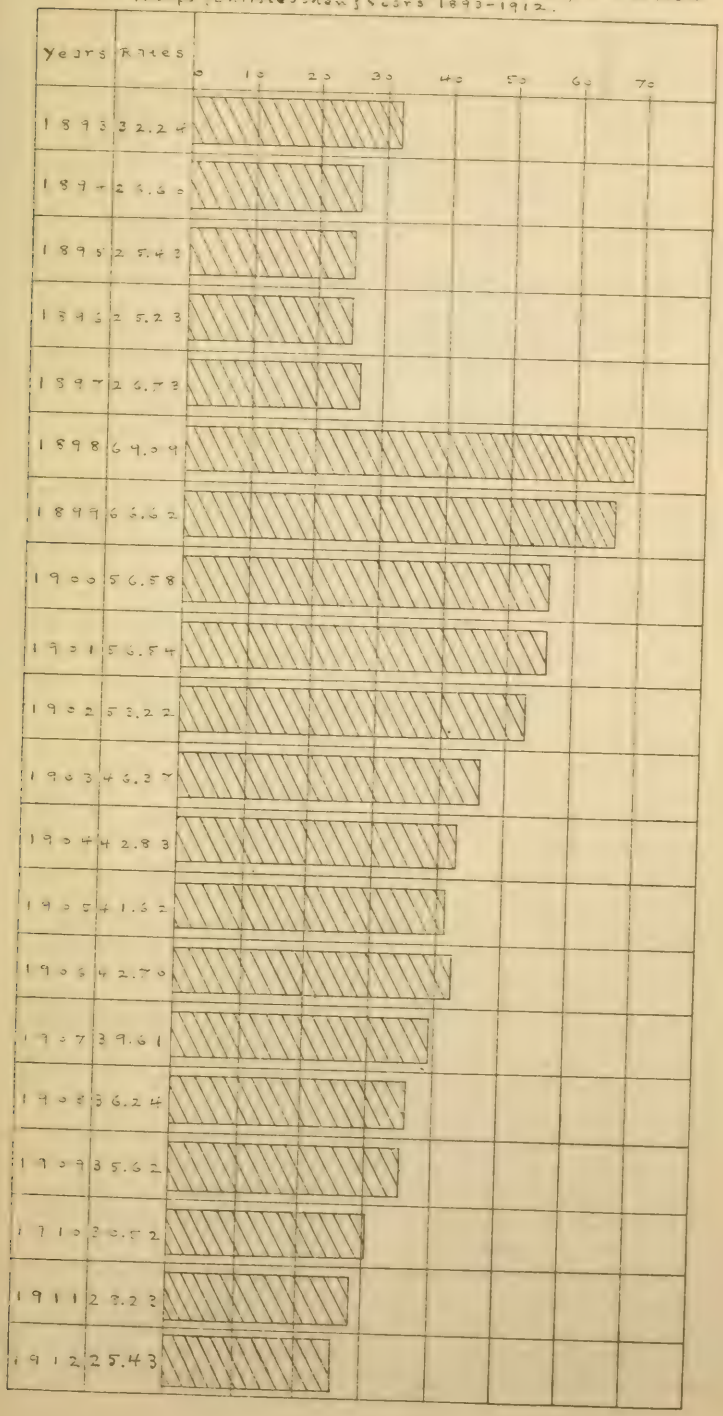


Chart B.

Noneffective Rates per 1000 for disease for the Army, American Troops, Enlisted men, years 1893–1912.



physical inspection, together with General Order 31, publishing to the Army the action of Congress in stopping the pay of men disabled on account of sickness due to alcoholism, drug addiction, and other misconduct (venereal diseases).

The diseases causing the highest noneffective rates were venereal diseases and tuberculosis (all). The rate for venereal diseases was 7.78 per 1,000 and that for tuberculosis (all) was 1.40. The noneffective rate for venereal diseases in 1911 was 10.14, and in 1910, 11.51. The rate for 1912, therefore, as stated above, shows a marked reduction. This rate would have been further decreased but for the enormous increase among the colored troops serving in the Philippine Islands, the noneffective rate there for these troops being 21.70 per 1,000 for venereal diseases alone. There were no colored troops serving in the Philippine Islands in 1910 and 1911. The total noneffective rate for venereal diseases for all colored troops in 1910 was 8.33; in 1911, 7.12, and in 1912, 11.11, while on the other hand, the total noneffective rate for white troops in 1910 was 11.65; in 1911, 10.27; and in 1912, 7.61.

ADMISSIONS TO SICK REPORT.

Chart C, giving the admissions to sick report for the Army since the year 1819, when the Office of the Surgeon General was first established as a bureau of the War Department, shows in a striking way the gradual decrease in the number sick or injured in the service. The case admission rate for all causes for the Army for 1912 was 823.94. By reference to the chart it will be seen that this is the lowest admission rate in the history of the Army. The highest admission rate on record for the Army was in 1841, when the total rate for all causes was 3,846.8, that for disease alone being 3,475.1.

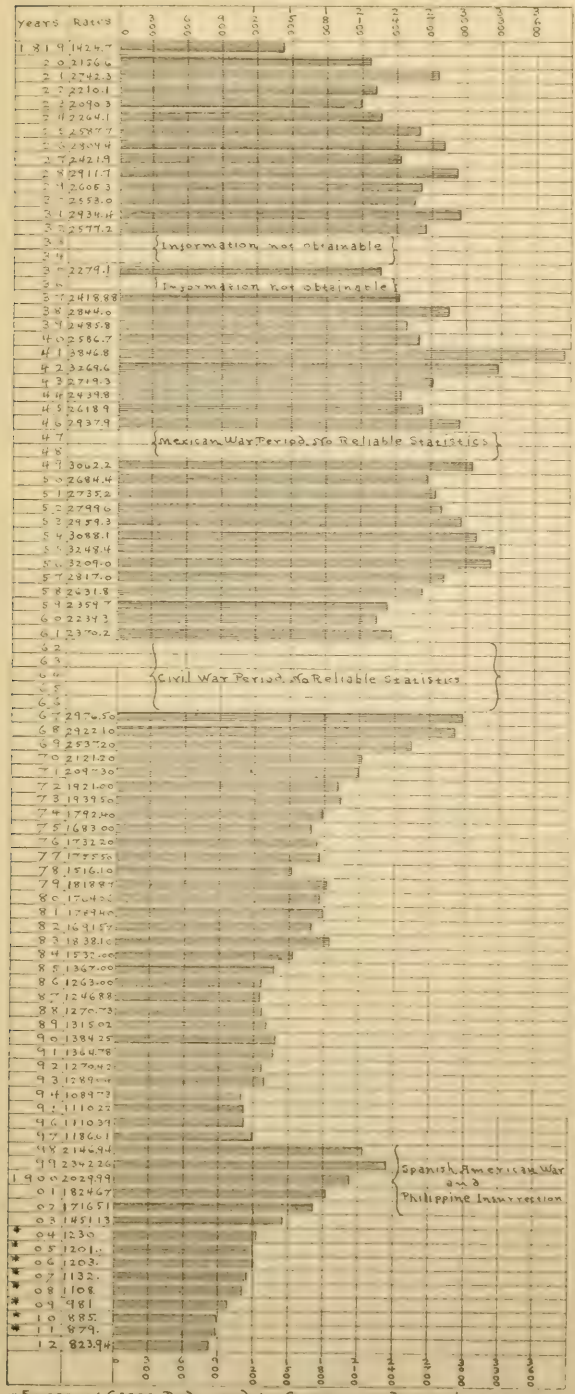
The case admission rate for disease for the Army for 1912 was 674.29. The corresponding rate was 717 for 1911 and 787 for 1910. The rate for 1912 was the lowest admission rate for disease in the history of the Army. Table No. 81 shows the case admission and total admission rates for the Army, United States, and American troops, Philippine Islands, 1904 to 1911, inclusive.

The diseases causing the highest admission rate were as follows, in the order named: Venereal diseases, 136.70; diseases of the pharynx, 65.33; malarial fevers, 40; bronchitis, 34.89. The venereal rate in 1911 was for all troops 185.13, that for white being 187.08 and that for colored 139.91. In 1910 the total venereal rate was 174.95, that for white being 175.16, that for colored 170.13. In 1912 the rate for the white troops was 130.79, colored 249.42. This increase in the rate for the colored troops was due, as stated before, to the enormous increase in the prevalence of venereal diseases among the colored troops serving in the Philippine Islands, the case admission rate for these troops being 524.06 per 1,000, which is believed to be probably the highest admission rate for venereal diseases for either white or colored troops in the history of the Army. The reason for this alarming increase is not apparent.

The case admission rate for external causes was 149.64. The corresponding rate was 161 for 1911 and 178 for 1910. The following were the principal causes, with ratios per 1,000: Traumatism by fall, 48.23; injuries by animals, 14.67; traumatism by cutting or piercing instruments, 12.02; poisoning by food, 3.74; burns, 2.50; effects of

Chart C

Admission Rates, All Causes, for the Army years 1819-1912.



* Excess of Cases Deducted to Correspond with years Preceding 1904, and 1912.

heat, 2.21, and traumatism by firearms, 2.02. Eight men were shot by sentry, with 4 deaths. Two were wounded in action without a death.

DISCHARGES FOR DISABILITY.

Chart D gives the rates for discharges for disability for the Army from the year 1819 to 1912, inclusive.

Soldiers stationed outside the territorial limits of the United States are now brought to the United States for discharge, except those belonging to the Porto Rican regiment and the Philippine Scouts. They are, however, credited in the tabulated reports to the country in which the soldiers were serving when they became disabled if their commands were there at date of discharge.

The present system requires that all soldiers certified by medical officers to be permanently incapacitated for the military service shall be examined and observed by a board of three medical officers at a recruit depot or general hospital before being discharged. The reports of these boards are sent to the War Department and discharges for disability are now made only by authority of the Secretary of War.

By reference to this chart it will be seen that the disability rate for 1912 was lower than for any year since the Spanish-American War, the lowest rates being for the years 1894–1898, inclusive, and for the year 1867. In 1912 there were in the Army 1,069 men discharged for disability, the rate being 13.43 per 1,000. The corresponding rate for the preceding year was 13.85. The rate for 1867 was 13 per 1,000, and the lowest rate from 1894–1898, inclusive, was that for 1895—the lowest on record for the Army—9.15 per 1,000. The highest rate in any year for discharge for disability was in 1849, when the total rate for discharges was 76.7 per 1,000.

The discharge rate for disease in 1912 was 12.18 per 1,000, as compared with 12.28 in 1911, and that for external causes was 1.24 in 1912, as compared with 1.56 in 1911. The diseases causing the highest discharge rate in 1912 were as follows: Mental alienation, 2.64; tuberculosis (all), 1.56; venereal diseases, 1.26; diseases of the urinary bladder, 0.38; and alcoholism, 0.33.

DEATHS FROM ALL CAUSES.

Chart E shows the total death rate for all causes for the Army from the year 1819 to 1912, inclusive. The total rate for 1912 was 4.79, as compared with the corresponding rate of 4.77 for 1911, and 4.46 for 1910. By reference to the chart, it will be seen that the rate for 1910 was the lowest on record in the Army. The highest death rate occurring in any year was in 1849, when the total rate for deaths was 80.2. This year, as stated above, also had the highest rate for discharges.

The death rate for diseases was 2.37 in 1912, which was the lowest on record in the Army, the next lowest being the rate in 1910, which was for the same causes, 2.44. The total number of deaths in 1912 was 381. The following diseases caused the highest number of deaths, absolute numbers being given: Tuberculosis (all), 25; organic diseases of the heart, 14; measles, 13; alcoholism, 12; and pneumonia, 12. The following were the principal causes of deaths from external

Chart D.

Discharge Rates, All Causes for the Army years 1819-1912.

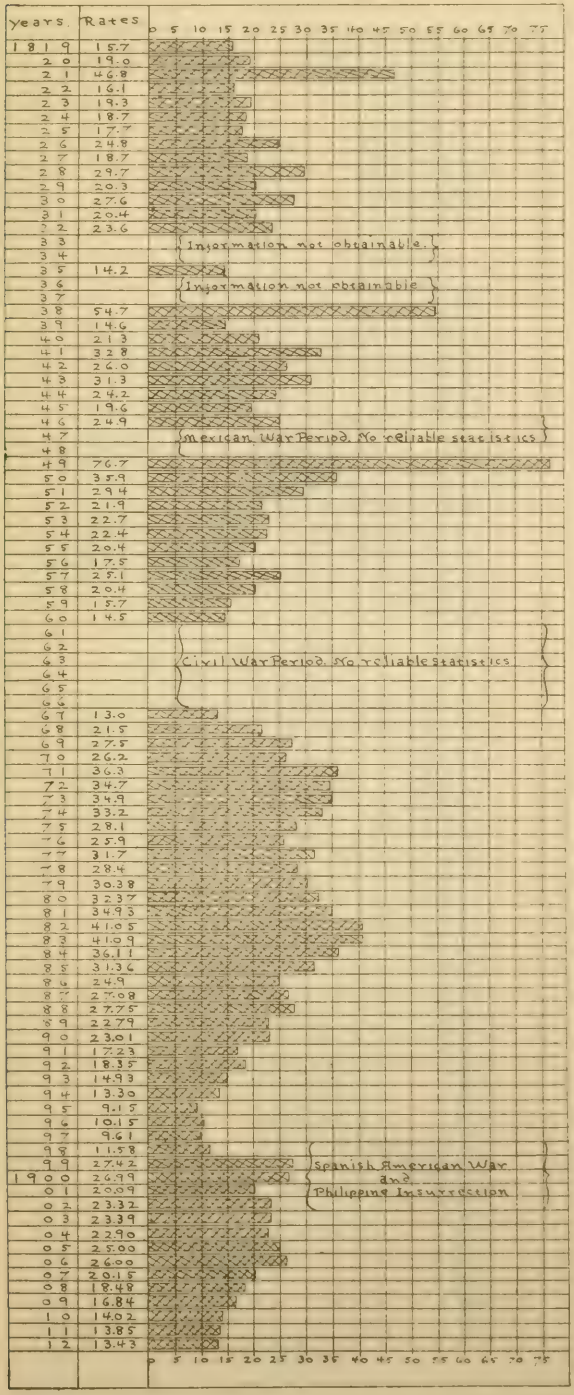


Chart L.

Death Rates, All Causes, for the Army, years, 1819-1912.

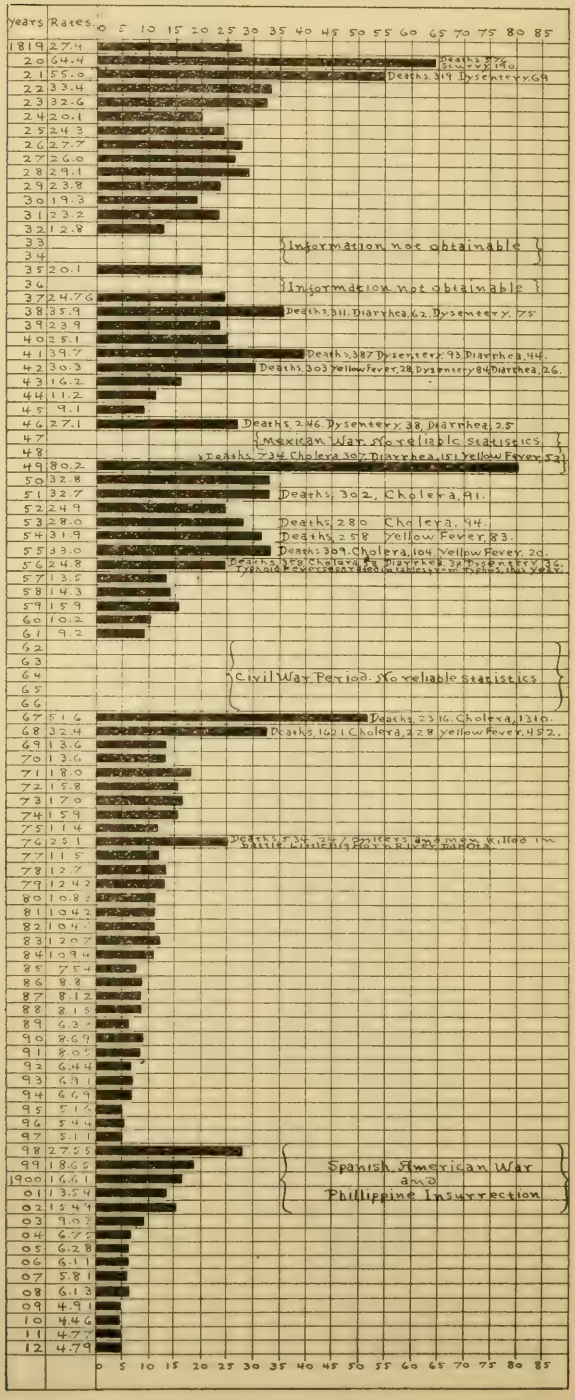


Chart F.

Death, Discharge and Noneffective Rates for Disease for the Army American Troops Enlisted Men 1893-1912

Years	Deaths	Discharges	Non-effective
1893	4.01	12.36	32.24
1894	4.55	10.41	26.60
1895	3.55	6.81	25.43
1896	3.83	8.13	25.23
1897	3.14	7.60	26.73
1898	22.00	7.40	69.09
1899	12.75	21.65	66.62
1900	11.62	21.13	56.58
1901	9.04	16.32	56.54
1902	12.95	20.92	53.22
1903	6.17	22.50	46.37
1904	3.87	20.49	42.83
1905	3.52	22.34	41.62
1906	3.28	23.46	42.70
1907	3.44	17.82	39.61
1908	3.48	16.51	36.24
1909	3.02	15.20	35.62
1910	2.44	12.55	30.52
1911	2.66	12.28	28.23
1912	2.37	12.18	25.43

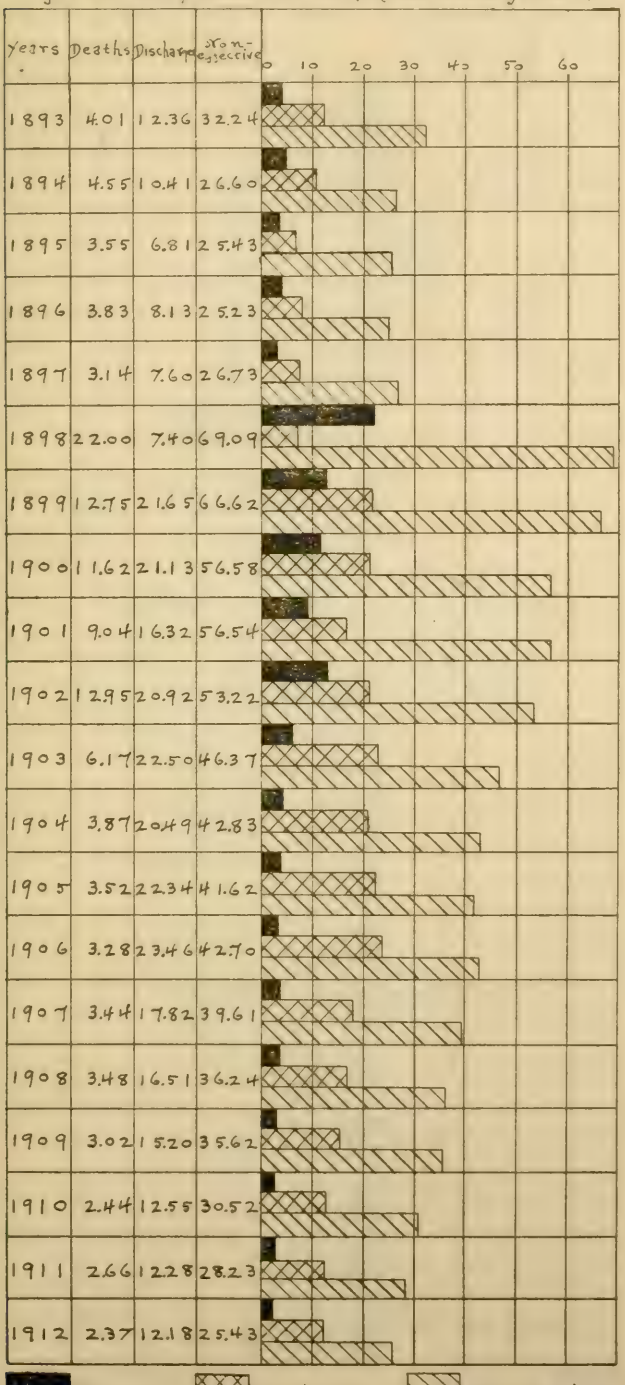


Chart G.

Total Losses, All Causes, for the Army, American Troops & Enlisted Men, 1893-1912.

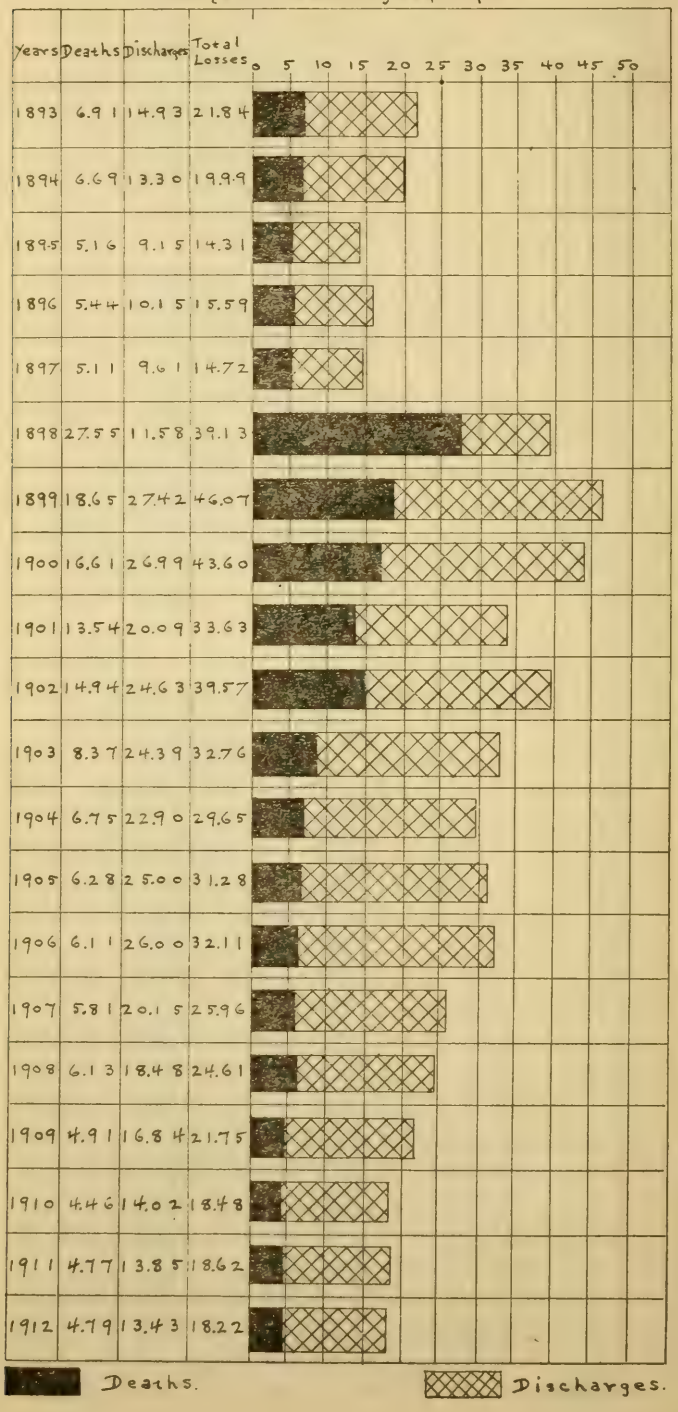
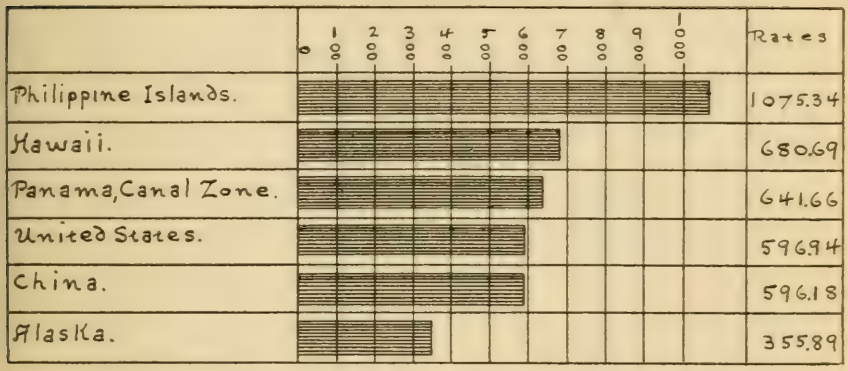


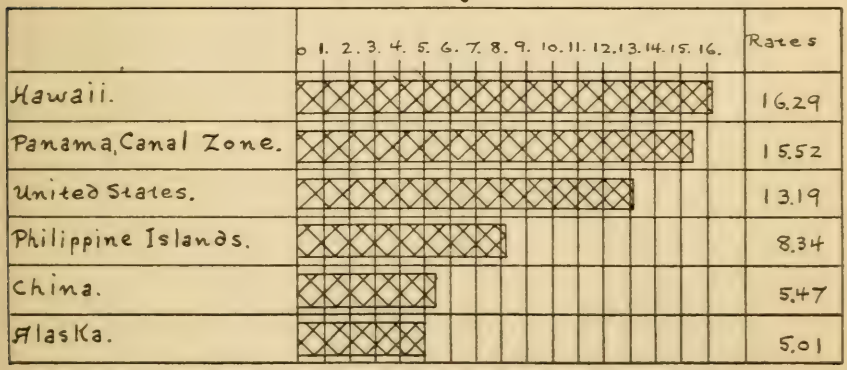
Chart H.

Admission, Discharge, Death and Noneffective Rates by Countries, American Troops & Enlisted Men, Year, 1912.

Admissions.



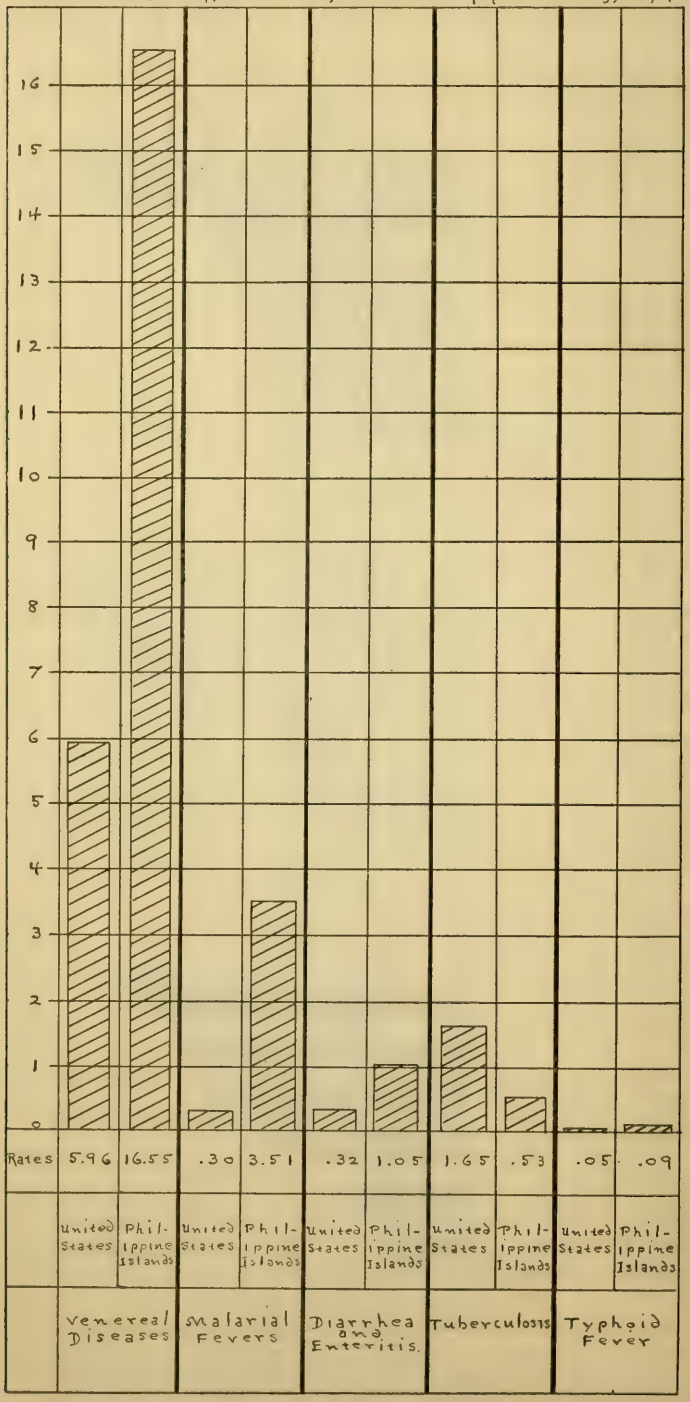
Discharges.



Deaths

Chart I

Noneffective Rates for certain Special Diseases for the United States & Philippine Islands, American Troops, Enlisted Men, year 1912.



causes: Suicides, 54; drowning, accidental, 43; traumatisms by crushings, 26; homicides, 20; deaths by fire arms, 15; and traumatisms by falls, 14.

INFLUENCE OF STATION ON TROOPS.

Regarding the comparative healthfulness of the various countries in which troops were serving during the year (Army transports being excluded) it will be noted in Table No. 3 that Alaska had, as usual, the lowest admission, discharge, and noneffective rates; Hawaii had the lowest death rate, the highest discharge rate, the second highest admission and noneffective rates; the Philippines had the highest admission and noneffective rates; China had the second lowest admission, discharge, and noneffective rates, and the second highest death rate; the Canal Zone had the highest death rate; and the United States had the second highest discharge rate and the second lowest death rate.

TABLE No. 3.—*Numerical view of the effect of disease and injury on United States troops, serving at home and abroad, in the year 1912, compared with corresponding data for the year 1911, by countries (enlisted men only).*

ABSOLUTE NUMBERS.

American troops (enlisted men).		Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Noneffective from sickness.	
			Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Days treated.	Constantly noneffective.
United States	1912	58,374	43,121	34,846	8,275	865	788	77	272	136	136	1,137	924	213	579,892	1,584.40
	1911	55,240	49,042	40,095	8,947	833	736	97	262	157	105	1,095	893	202	633,063	1,734.42
Alaska	1912	1,197	612	426	186	6	6	.....	7	4	3	13	10	3	7,114	19.44
	1911	1,119	468	316	152	5	3	2	7	6	1	12	9	3	5,369	14.47
Philippine Islands	1912	12,357	15,409	13,288	2,121	119	103	16	67	37	30	186	140	46	202,321	552.79
	1911	12,454	15,172	12,798	2,374	145	131	14	66	24	42	211	155	56	196,140	537.37
China	1912	1,097	765	654	111	6	6	.....	8	4	4	14	10	4	10,442	28.53
	1911	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Hawaii	1912	3,376	3,161	2,298	863	61	55	6	13	3	10	74	58	16	41,323	112.90
	1911	2,014	2,176	1,629	547	28	27	1	6	2	4	34	29	5	32,726	89.66
Canal Zone	1912	773	616	496	120	12	12	.....	7	1	6	19	13	6	7,848	21.44
	1911	204	192	167	25	.....	.....	.....	1	.....	1	1	.....	1	1,909	5.23
Army transports	1912	1,093	803	767	36	.....	.....	.....	7	4	3	7	4	3	13,281	36.29
	1911	1,700	1,018	966	52	.....	.....	.....	6	5	1	6	5	1	14,414	39.49
Total	1912	**78,267**	**64,487**	**52,775**	**11,712**	**1,069**	**970**	**99**	**381**	**189**	**192**	**1,450**	**1,159**	**291**	**862,221**	**2,355.80**
	1911	72,748	68,073	55,975	12,098	1,011	897	114	348	194	154	1,359	1,091	268	883,646	2,420.95
Regular Army, American troops, 1902 to 1911		65,831	820,477	682,639	137,838	13,473	12,071	1,402	4,783	3,142	1,641	18,256	15,213	3,043	11,113,926	3,043.25
Porto Rico regiment	1912	588	672	610	62	4	4	.....	2	.....	2	6	4	2	6,042	16.51
	1911	580	609	562	47	5	4	1	4	2	2	9	6	3	6,304	17.27
Philippine Scouts	1912	5,407	3,667	3,337	330	45	38	7	24	17	7	69	55	14	40,210	109.86
	1911	5,266	3,922	3,510	412	26	23	3	24	17	7	50	40	10	38,172	104.58

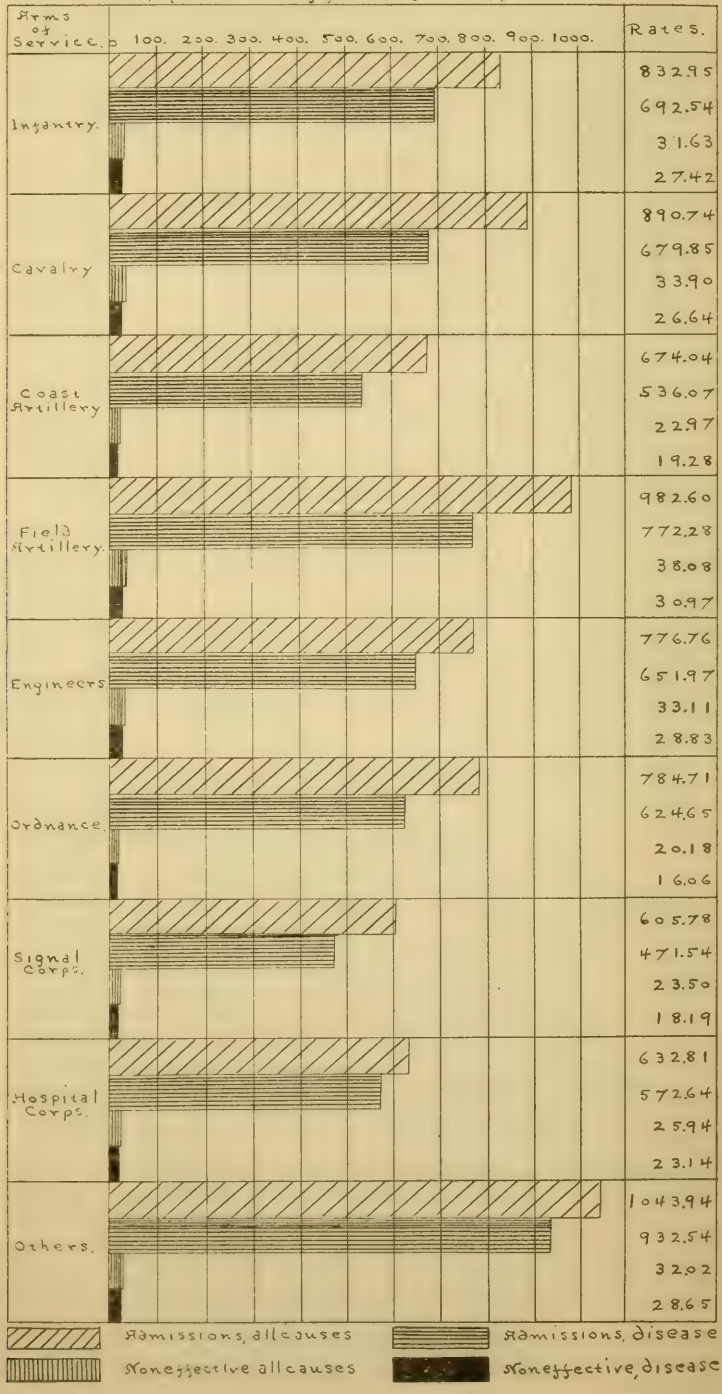
TABLE NO. 3.—*Numerical view of the effect of disease and injury on United States troops, serving at home and abroad, in the year 1912, compared with corresponding data for the year 1911, by countries (enlisted men only)*—Continued.

PROPORTIONATE NUMBERS.

American troops (enlisted men.)		Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Constantly non-effective.	Days treated.	
			Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.		Each soldier.	Each case.
United States	1912	58,374	738.70	596.94	141.76	14.48	13.19	1.29	4.55	2.28	2.28	19.03	15.47	3.57	27.15	9.93	13.45
	1911	55,240	887.80	725.83	161.97	15.00	13.26	1.75	4.72	2.83	1.89	19.72	16.09	3.64	31.40	11.46	12.91
Alaska	1912	1,197	511.28	355.89	155.39	5.01	5.01	.....	5.85	3.34	2.51	10.86	8.35	2.51	16.24	5.94	11.62
	1911	1,119	418.23	282.40	135.84	4.47	2.68	1.79	6.26	5.36	.89	10.73	8.04	2.68	13.15	4.79	11.47
Philippine Islands	1912	12,357	1,246.99	1,075.34	171.64	9.63	8.34	1.29	5.42	2.99	2.43	15.05	11.33	3.72	44.74	16.37	13.13
	1911	12,454	1,218.24	1,027.62	190.62	11.64	10.52	1.12	5.30	1.93	3.37	16.94	12.45	4.49	43.15	15.75	12.93
China	1912	1,097	697.36	596.18	101.19	5.47	5.47	.....	7.29	3.65	3.65	12.76	9.12	3.65	26.01	9.52	13.65
	1911	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Hawaii	1912	3,376	936.32	680.69	255.63	18.07	16.29	1.78	3.85	.89	2.96	21.92	17.18	4.74	33.44	12.24	13.08
	1911	2,014	1,080.44	808.84	271.60	13.90	13.41	.50	2.98	.99	1.99	16.88	14.40	2.49	44.52	16.25	15.04
Canal Zone	1912	773	796.90	641.66	155.24	15.52	15.52	.....	9.06	1.29	7.76	24.58	16.81	7.76	27.74	10.15	12.74
	1911	204	941.18	818.63	122.55	.....	.....	.....	4.90	.....	4.90	4.90	.....	4.90	25.64	9.36	9.94
Army transports	1912	1,093	734.68	701.74	32.94	.....	.....	.....	6.40	3.66	2.74	6.40	3.66	2.74	33.20	12.15	16.54
	1911	1,700	598.83	568.24	30.59	.....	.....	.....	3.53	2.94	.59	3.53	2.94	.59	23.23	8.48	14.16
Total	1912	**78,267**	**823.4**	**674.29**	**149.64**	**13.43**	**12.18**	**1.24**	**4.79**	**2.37**	**2.41**	**18.21**	**14.55**	**3.65**	**30.99**	**11.02**	**13.37**
	1911	72,748	935.74	769.44	166.30	13.85	12.28	1.56	4.77	2.66	2.11	18.62	14.94	3.67	33.28	12.15	12.98
Regular Army, American troops, 1902 to 1911		65,831	1,246.33	1,036.95	209.38	20.16	18.06	2.10	7.16	4.70	2.46	27.32	22.76	4.56	46.23	16.88	13.55
Porto Rican regiment	1912	588	1,142.86	1,037.41	105.44	6.80	6.80	.....	3.40	.....	3.40	10.20	6.80	3.40	17.47	10.28	8.99
	1911	580	1,050.00	968.97	81.03	8.62	6.90	1.72	6.90	3.45	3.45	15.52	10.35	5.17	29.78	10.87	10.35
Philippine Scouts	1912	5,407	678.20	617.16	61.04	8.19	6.92	1.27	4.37	3.09	1.27	12.56	10.01	2.54	20.32	7.44	10.96
	1911	5,266	744.78	666.54	78.24	4.94	4.37	.57	4.56	3.23	1.33	9.50	7.60	1.90	19.86	7.25	9.73

Chart K.

Admission and Noneffective Rates for All Causes and Disease for the Army, American Troops, Enlisted Men, by Arms of Service, Year 1912.



INFLUENCE OF ARMS OF SERVICE.

In these comparisons the enlisted men of the Ordnance Department and Signal Corps are not considered on account of their small number and the special character of their service.

The admission rate was highest for the Field Artillery and lowest for the Hospital Corps; the death rate was highest in the Hospital Corps and lowest in the Field Artillery.

The following table shows the relative frequency of the occurrence of the more important diseases for the various arms of the service, the figure 1 indicating the highest ratio and 6 the lowest in each case for each arm:

TABLE No. 4.—*The relative frequency of occurrence of certain important diseases by arms of service, in the Army, among American troops, enlisted men, year 1912.*

Arms of service.	Most important diseases.											
	Venereal.	Tonsilitis and pharyngitis.	Diarrhea and enteritis.	Malaria.	Bronchitis.	Alcoholism.	Rheumatism, articular.	Dysentery.	Tuberculosis.	Typhoid fever.	Pneumonia (lobar).	Injuries.
Cavalry	2	4	2	3	6	5	4	1	5	2	4	1
Field Artillery	3	1	1	2	1	4	1	5	2	4	6	2
Coast Artillery	5	6	5	6	4	2	5	6	6	5	5	4
Infantry	1	3	3	4	2	3	2	2	4	3	1	3
Engineers	4	5	6	1	3	6	6	4	3	1	2	5
Hospital Corps	6	2	4	5	5	1	3	3	1	6	3	6

INFLUENCE OF RACE.

(See Tables 67, 70, and 76.)

The tables show that the colored troops had the highest noneffective and death rates, the second highest admission and total loss rates, and the second highest average number of days for each case treated; the Porto Rican troops had the highest admission rate, the lowest death and noneffective rates and least number of days for each case treated. The white troops had the highest discharge and total loss rates, the highest average number of days for each case treated, and the second highest constant noneffective and death rates; and the Philippine troops had the lowest admission rate and the second lowest discharge rate. The constant noneffective rates were colored, 33.40; white, 29.93; Philippine, 20.32; Porto Rican, 17.47. The case admission rates were Porto Rican, 1,142.86; colored, 978.98; white, 815.80; Philippine, 678.20. The discharge rates were white, 13.76; Philippine, 8.19; colored, 6.92; Porto Rican, 6.80. The death rates were colored, 7.18; white, 4.66; Philippine, 4.37; Porto Rican, 3.40. The rates for total losses were white, 18.42; colored, 14.10; Philippine, 12.56; Porto Rican, 10.20. The average number of days lost for each case treated was white, 13.43; colored, 12.49; Philippine, 10.96; Porto Rican, 8.99.

The admission rate for venereal diseases was colored, 249.42; white, 130.79; Porto Rican, 105.44; Philippine, 55.67. Alcoholism,

white, 17.80; colored, 9.23; Porto Rican, 1.70; Philippine, 0.37. Malarial fevers, Philippine, 241.91; Porto Rican, 52.72; white, 41.11; colored, 18.97. Tuberculosis (all) Philippine, 5.92; colored, 5.38; Porto Rican, 3.40; white, 3.39. Dysentery, Porto Rican, 34.01; Philippine, 7.03; white, 4.33; colored, 3.85. Rheumatism, Porto Rican, 11.90; colored, 11.54; white, 8.98; Philippine, 4.81. Diarrhea and enteritis, Porto Rican, 112.24; colored, 44.09; white, 29.69; Philippine, 18.86. Mental alienation, white, 3.47; colored, 3.08; Porto Rican, 1.70; Philippine, 0.92. It will be seen from the above figures that as usual the white race had the highest rate for alcoholism with the Philippine Scouts having the highest rate for malarial fevers due, to a large extent, to their living outside the barracks and being unprotected by mosquito nets. The colored troops, due to the unusually high rate for venereal diseases for those of that color who were serving in the Philippines, occupy the unenviable position of having the highest venereal rate.

It will be noted that the Porto Rican troops had by far the highest rates for gastro-intestinal disorders as shown by the exceedingly high rates for dysenteries and diarrhea and enteritis. The Philippine troops had the highest rate for tuberculosis (all) and the white troops for mental alienation.

COMPARISON WITH FOREIGN ARMIES.

An effort is made in Chart L and Tables Nos. 77 and 78 to make a comparison of the data available in the annexes to the annual reports of the medical departments of the armies of a number of foreign Governments. There are, however, so many factors which are peculiar to each country that an accurate comparison is impossible. For example, in most foreign services many of the minor ailments, which in the United States Army are treated in quarters and recorded with the same accuracy and care as in hospital cases, are not made of record in the medical reports.

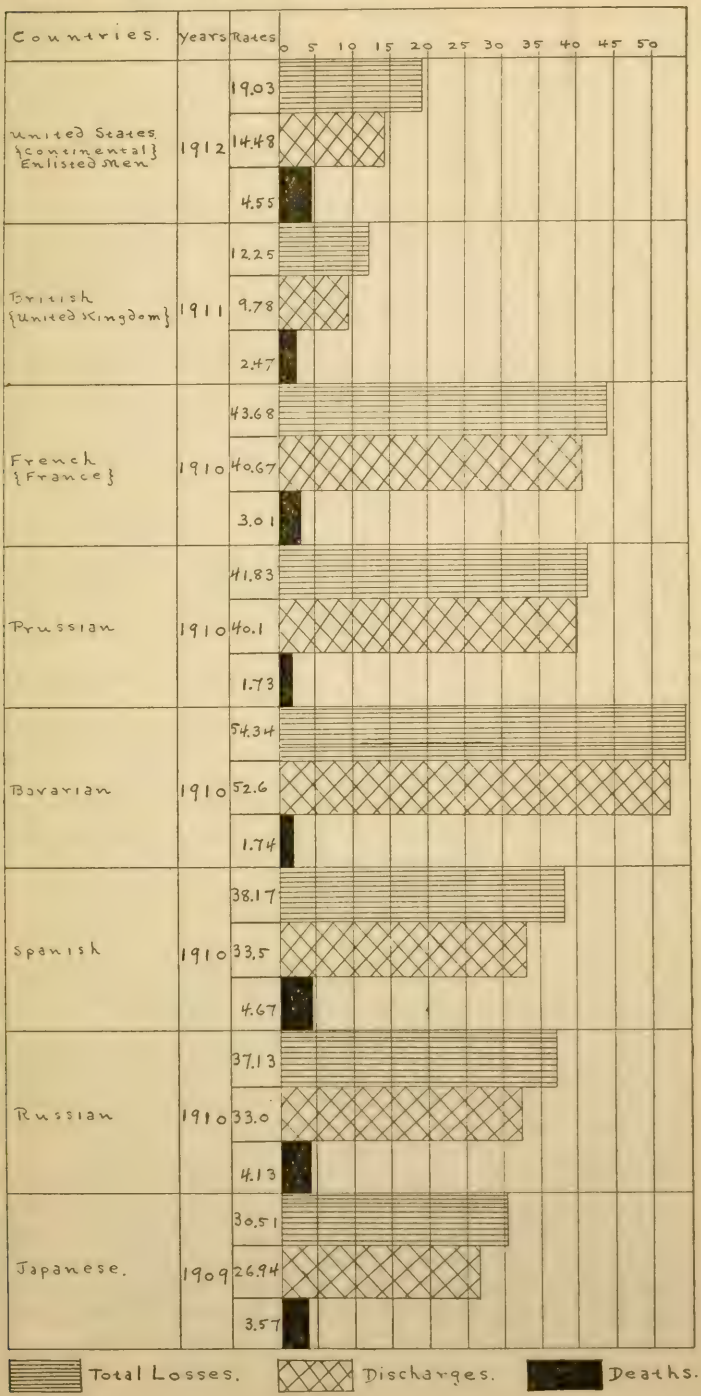
Table No. 77 shows that the admission rate for the United States for all causes was 738.70. This compares with the foreign armies as follows:

Higher:		Lower:	
French	1,982.00	Prussian	576.50
Dutch	1,280.00	Bavarian	444.10
Spanish	1,017.30	Russian	442.00
Japanese	856.30		
Austro-Hungarian	823.20		
British	802.77		
Portuguese	782.00		

It will thus be seen that the admission rate for the Army in the United States was lower than any except that for the Russian, Bavarian, and Prussian. The constant noneffective rate for the Army in the United States was 27.15 per 1,000. This compares with foreign armies as follows: French, 32.58; Spanish, 31.56; Japanese, 30.97; British, 27.16; Portuguese, 26.36; Dutch, 24.95; Prussian, 24.34; Bavarian, 21.94. The United States Army, therefore, had a lower noneffective rate than the other countries with which the comparison was made, except the Bavarian, Prussian, Dutch, and Portuguese.

Chart L.

Rates for Total Losses, Discharges and Deaths, by Countries.



The discharge rate for the United States was 14.48 as compared with:

Higher:		Higher—Continued.	
Bavarian	52.60	Russian	33.00
French	40.67	Japanese	26.94
Prussian	40.10	Lower:	
Spanish	33.50	British	9.78

These figures show very conclusively the fact that has been noted for a great many years that men are discharged much more freely in foreign armies than in the United States Army.

The death rate was 4.55 as compared with the Spanish, 4.67; Russian, 4.13; Japanese, 3.57; French, 3.01; Portuguese, 2.99; Austro-Hungarian, 2.84; British, 2.47; Dutch, 2.22; Bavarian, 1.74; Prussian, 1.73. Only one army had a higher death rate than the United States, that being the Spanish. As stated above, this is to be accounted for by the fact that the other armies discharge cases very much more freely than is done in the United States, and so send home to die cases which are in our Army cared for until the end in military hospitals.

The rate for the total losses, viz, discharges for sickness and deaths taken together, for the United States Army was 19.03 as compared with:

Higher:		Higher—Continued.	
Bavarian	54.34	Russian	37.13
French	43.68	Japanese	30.51
Prussian	41.83	Lower:	
Spanish	38.17	British	12.25

The British Army was the only one having a lower rate for total losses than the United States.

Table No. 78 shows that the admission rates for alcoholism and gonorrhea are much higher for the Army in the United States than for any other army. The rate for chancroids (ulcus molle) is much higher in the United States than for any other army except the Spanish. The rate for syphilis was higher in the United States than for any other with which a comparison is made, except the British, the rates being as follows: United States, 25.58; British, 29.30; Austro-Hungarian, 16.70; Russian, 15.01; Spanish, 11.91; Prussian, 5.30; Bavarian, 4.20.

For typhoid fever (typhus abdominalis) the rate for the United States was 0.26 as compared with Spanish 7.03, Japanese 5.47, Russian 5.20, French 2.38, British 1.7, Austro-Hungarian 1.30, Dutch 0.51, Prussian 0.19, Bavarian 0.13. It will thus be seen that the rate for this disease for the United States was lower than for any other army with which compared, except the Prussian and Bavarian. The death rate for typhoid fever was for the United States 0.03 as compared with Spanish 1.20, Russian 0.75, Japanese 0.55, French 0.31, Austro-Hungarian 0.20, Dutch 0.128, Prussian 0.06, Bavarian, 0.03.

For malarial fevers the rate for the United States was lower than that for the British, Russian, Japanese, and Spanish, and higher than that for the Austro-Hungarian, Dutch, French, Bavarian, and Prussian in the order mentioned. For dysentery the rate for the United States was higher than for any other of the armies compared except for the British, our rate being 1.78 and the British 3.20.

For pulmonary tuberculosis the rate for the United States Army was 2.88 as compared with Spanish 5.81, Dutch 4.82, French 4.73, Japanese 3.85, Russian 2.09, Prussian 1.40, Bavarian 1.40, Austro-Hungarian 1.40, British 1.30.

It will be noticed that in these tables the figures for the American troops are for the year 1912, for the British for the year 1911, and for the others included in the table for 1910, except that for the Japanese and Portuguese which are for 1909.

SURGICAL OPERATIONS.

On page 220 will be found Table No. 66 of the principal surgical operations performed by medical officers upon officers and enlisted men. Operations upon families of officers and enlisted men and other civilians who are entitled to treatment at Army posts are not included. In 4,855 operations there were 20 failures and 25 deaths. The anæsthetic used was ether in 1,809 cases, chloroform in 226, chloroform and ether 49, gas 36, local 2,233, and none was required in 502 cases. Of major surgical operations, there were 357 operations for appendicitis, 241 for inguinal hernia, 17 for empyema, 25 for hepatic abscess, 46 for ischio-rectal abscess, and 303 for hemorrhoids. There were 7 deaths following operation for appendicitis, 2 each for intestinal obstruction and abscess of liver, gunshot wound (3), following amputation (3), and 1 each for operations on the following conditions: Goiter, ulcer of stomach, perforation of typhoid ulcer, tumor inoperable, subphrenic abscess, rupture of urinary bladder from fall, hypertrophy of prostate (senile), and cellulitis.

TABLE No. 5.—*Influence of disease on enlisted American troops of the Army, by length of service, age, and arms of service, for the year 1912.*

LENGTH OF SERVICE.

	Mean strength.	Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.	Rate per 1,000 of mean strength. Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.
Under 1 year	17,414	19,693	461	40	719.00	1,130.87	26.02	2.26	41.28
1 to 2 years	14,366	11,089	162	17	421.15	771.89	11.10	1.17	29.32
2 to 3 years	8,633	4,122	48	9	139.05	477.47	5.46	1.02	16.11
3 to 4 years	7,304	3,567	74	7	145.64	488.36	9.95	.94	19.94
4 to 5 years	6,921	3,779	57	12	143.00	546.02	8.09	1.70	20.66
5 to 10 years	11,154	5,513	89	38	212.42	494.26	7.84	3.35	19.04
10 years and over	12,475	5,012	79	66	210.31	401.76	6.23	5.20	16.86
Total	78,267	52,775	970	189	1,990.57	674.29	12.18	2.37	25.43

AGE.

19 years and under	3,463	3,765	72	14	121.08	1,087.21	20.44	3.97	34.96
20 to 24 years	31,265	26,552	431	42	962.71	849.25	13.56	1.32	30.79
25 to 29 years	20,792	12,688	251	31	496.55	610.23	11.86	1.47	23.88
30 to 34 years	11,272	5,301	128	36	218.54	470.28	11.16	3.14	19.39
35 to 39 years	6,187	2,405	49	17	99.48	388.72	7.79	2.70	16.08
40 to 44 years	3,204	1,200	22	29	56.91	386.03	6.63	8.74	17.44
45 to 49 years	1,484	554	13	12	22.79	373.31	8.07	7.45	15.36
50 years and over	540	250	4	8	12.51	462.96	7.27	14.55	23.16
Total	78,267	52,775	970	189	1,990.57	674.29	12.18	2.37	25.43

TABLE No. 5.—*Influence of disease on enlisted American troops of the Army, by length of service, age, and arms of service, for the year 1912*—Continued.

ARMS OF SERVICE.

	Mean strength.	Admitted.	Discharged on certificate of disability.	Rate per 1,000 of mean strength.					
				Died.	Constantly noneffective.	Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.
Infantry	27,860	19,294	292	76	763.83	692.54	10.34	2.69	27.42
Cavalry	13,122	8,921	118	23	349.63	679.85	8.85	1.72	26.64
Field Artillery	5,116	3,951	68	7	158.43	772.28	13.07	1.35	30.97
Coast Artillery	17,438	9,348	214	28	336.27	536.07	12.02	1.57	19.28
Ordnance	706	441	5	2	11.34	624.65	6.94	2.77	16.06
Engineers	1,747	1,139	20	4	50.37	651.97	11.27	2.25	28.83
Signal Corps	1,177	555	5	2	21.41	471.54	4.18	1.67	18.19
Hospital Corps	3,407	1,951	65	12	78.84	572.64	18.76	3.46	23.14
All others	7,694	7,175	183	35	220.45	932.54	23.27	4.45	28.65
Total	78,267	52,775	970	189	1,990.57	674.29	12.18	2.37	25.43

The preceding table shows that those having less than one year of service had as usual, the highest noneffective, admission, and discharge rates. These rates are also highest for these 19 years or under. The highest death rates were for those 50 years and over, and for those having 10 years or over of service. The highest noneffective and admission rates were in the Field Artillery, the highest death rate, and the highest discharge rate in the Hospital Corps.

UNITED STATES (CONTINENTAL) EXCLUSIVE OF ALASKA.

CONSTANTLY NONEFFECTIVE RATE.

The average mean strength of the troops serving in the United States was 58,374 (S. G. O.), of which 55,886 were white and 2,488 colored. The noneffective rate, the true measure of the effect of sickness on the military efficiency, for this year shows a decided improvement over last year. The rate was 27.15 per 1,000, as compared with 31.40 for 1911 and 33.95 for 1910. That for disease was 22.57, and for injury 4.58 in 1912, as compared with 26.41 and 4.99 for 1911. The number constantly sick from disease and external causes in 1912 was 1,584, and in 1911, 1,734. In other words, in 1912, there were 150 less men constantly sick than in 1911, although the average strength in 1912 was 3,134 more than it was in 1911. The noneffective rate for 1910, 1909, 1908, 1907, and 1906 was, respectively, 33.95, 39.70, 41.19, 45.22, and 46.92. The highest noneffective rate for disease was that for venereal disease, 5.96 per 1,000. In 1911 it was 8.82 and in 1910, 10.14. The second highest was tuberculosis (all kinds), 1.65. This rate was 1.63 in 1911, and 1.87 in 1910.

ADMISSION RATES.

As stated on page 16 in the tabulations for 1912, cases only are counted, whereas in the years 1904 to 1911, inclusive, admissions were counted. As stated, in counting cases only all readmissions for obviously the same attack of the same disease are omitted from the tabulation. Table 81, page 285, shows case admissions and total admissions for the Army, United States, and American troops, Philippine Islands, 1904 to 1911, inclusive.

The case admission rate for 1912 was 738.70 per 1,000. This is quite an improvement as compared with the corresponding rate, 837 for 1911, 840 for 1910, 945 for 1909, 1,079 for 1908, and 1,093 for 1907. The case admission rate for disease was, in 1912, 596.94. The corresponding rate was 680 per 1,000 in 1911 and 662 in 1910. The case admission rate for external causes was 141.76 per 1,000. This is also an improvement over the corresponding rate for external causes of 157 for 1911 and 178 for 1910. The highest case admission rate was for venereal diseases, 115.74 per 1,000, as compared with the corresponding rate of 145.29 for 1911. The second highest rate was for diseases of the pharynx, 74.45.

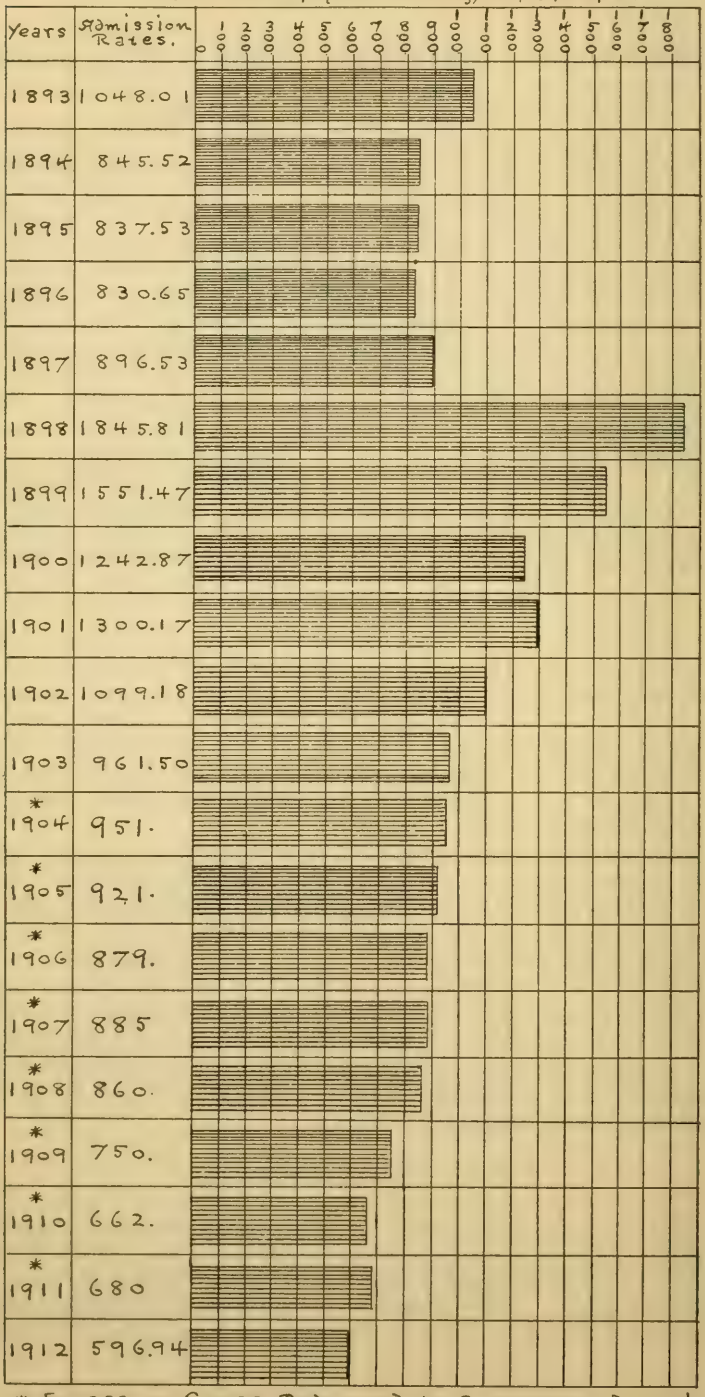
DISCHARGES FOR DISABILITY.

The disability discharge rate for the United States for 1912 was 14.48 per 1,000, as compared with 15.00 for 1911, 15.28 for 1910, 18.87 for 1909, and 21.35 for 1908. These figures show a very material reduction. The cause for this improvement during the last few years is believed to have been due to a large extent to General

Chart M.

Admission Rates for Disease for the United States, American troops, Enlisted men, 5 years, 1893–1912.

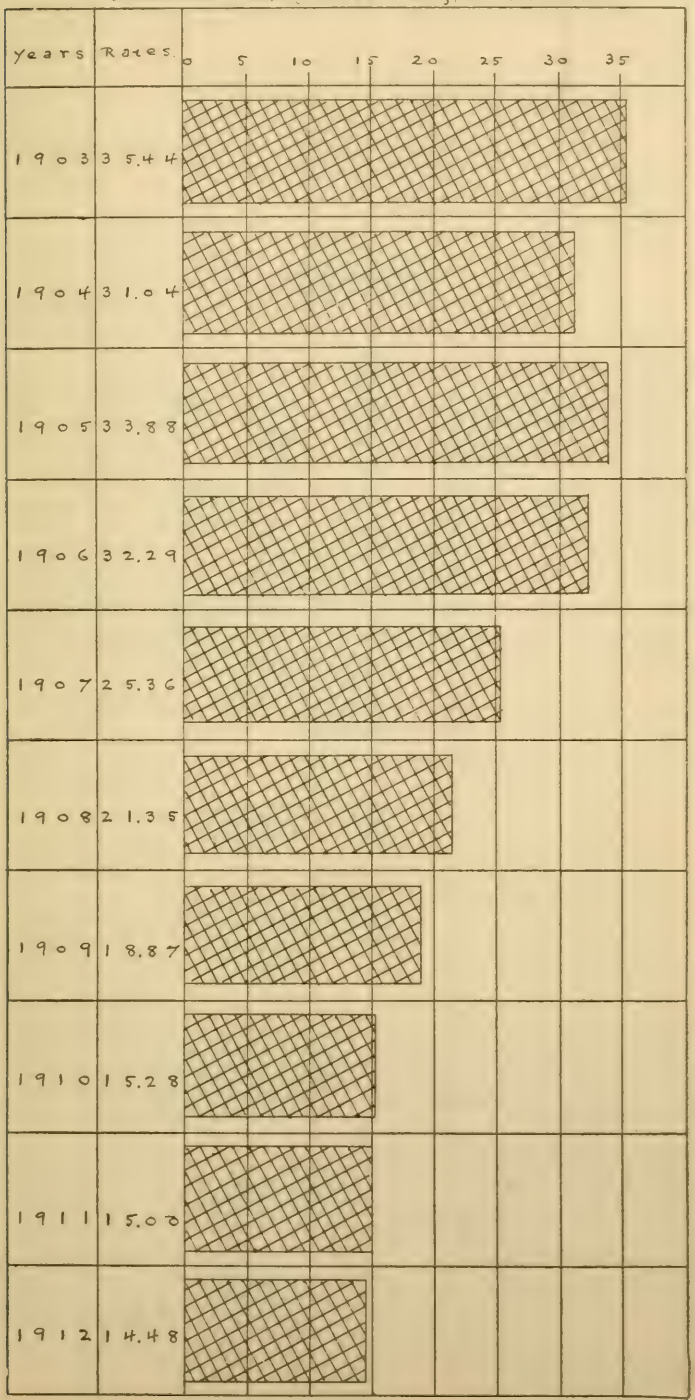
Years	Admission Rates.
1893	1048.01
1894	845.52
1895	837.53
1896	830.65
1897	896.53
1898	1845.81
1899	1551.47
1900	1242.87
1901	1300.17
1902	1099.18
1903	961.50
*1904	951.
*1905	921.
*1906	879.
*1907	885
*1908	860.
*1909	750.
*1910	662.
*1911	680
1912	596.94



* Excess of Cases Deducted to Correspond with years preceding 1904, and 1912.

Chart N.

Discharge Rates, All Causes, for the United States, for American Troops, Enlisted Men, years 1903-1912.



Order 174, War Department, 1909, which requires that soldiers certified by medical officers to be permanently incapacitated for the military service shall be examined and observed by a board of three medical officers at a recruit depot or a general hospital before discharge.

The following table shows the result of the work of the boards at the recruiting depots:

TABLE No. 6.—*Results at recruit depots of examination by boards, of soldiers recommended for discharge.*

	Recruit depots.					
	Columbus Barracks, Ohio.	Jefferson Barracks, Mo.	Fort Logan, Colo.	Fort McDowell, Cal.	Fort Slocum, N. Y.	Total.
Number received	23	84	85	112	178	482
Number discharged for disability	20	64	66	101	135	386
Incurred "In line of duty"	3	19	26	39	24	111
Incurred "Not in line of duty"	17	45	40	62	111	275
Number in which line of duty was changed from "Yes" to "No"	1	10	3	.....	3	17
Number in which line of duty was changed from "No" to "Yes"	.....	2	1	2	2	7
Number returned to duty	1	13	9	2	8	33
Number otherwise disposed of	2	.....	5	6	12	25
Number remaining at end of year	.....	7	5	3	23	38

The principal causes of discharge with the percentage of the total number of discharges were mental alienation 21.07, tuberculosis (all) 12.69, venereal diseases 9.52, flat feet 8.76, and organic diseases of the heart 5.58.

TABLE No. 7.—*Discharges for disability, year 1912, United States, continental (excluding Alaska).*

Causes of discharge.	Number discharged.	Percentage of total discharges for diseases or external causes.	Discharges for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty.
General diseases	252	31.98	106	72	74	6	23
Tuberculosis (of the lungs, 94; of other organs, 6)	100	12.69	76	24	.....	.....	12
Venereal diseases	75	9.52	.....	18	57	.....	7
Syphilis (tertiary, 21; secondary, 14; undetermined, 2)	37	4.70	.....	14	23	.....	5
Gonorrhea and results (arthritis, 18; chronic gonorrhea, 9; diseases of the eyes, 1; epididymitis, 1; other results, 7)	36	4.57	.....	4	32	.....	2
Chancroidal buboes, chronic	2	.25	.....	.....	2	.....	.....
Alcoholism, chronic	22	2.79	.....	11	11	.....	1
Chronic rheumatism and gout (chronic articular, 13; arthritis deformans, 2; gout, 1)	16	2.03	7	8	1	.....	7
Measles	6	.76	6	.....	.....	6	.....
Dysentery (bacillary, 1; entamoebic, 5)	6	.76	6	.....	.....	.....	.....
Exophthalmic goiter	6	.76	1	5	.....	.....	1
Drug habit (cocaine, 4; morphine, 1)	5	.63	.....	.....	5	.....	.....
Diabetes mellitus	4	.51	3	1	.....	.....	1
Scoliosis	2	.25	.....	2	.....	.....	.....
Cancer	2	.25	2	.....	.....	.....	.....
Diabetes insipidus	2	.25	.....	2	.....	.....	.....
Acute articular rheumatism	1	.13	1	.....	.....	.....	.....

TABLE No. 7.—*Discharges for disability, year 1912, United States, continental (excluding Alaska)*—Continued.

Causes of discharge.	Number discharged.	Percentage of total discharges for diseases or external causes.	Discharges for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty
General diseases—Continued.							
Deafness following mumps	1	0.13	1				
Purulent infection (pyemia)	1	.13	1				
Benign tumor (cerebral)	1	.13	1				
Leukæmia	1	.13	1				
Hemophilia	1	.13		1			1
Diseases of the nervous system and organs of special sense	277	35.15	86	176	12	5	34
Diseases of the nervous system	237	30.08	67	158	12		30
General paralysis of the insane and other forms of mental alienation	166	21.07	43	112	11		21
Dementia praecox	50	6.35	21	29			3
Defective mental development	44	5.58		44			11
Psychosis maniac depressive	15	1.90	8	7			
General paralysis of the insane	10	1.27	3		7		
Psychasthenia	2	.25		2			1
Psychosis traumatic	1	.13		1			
Other varieties	44	5.58	11	29	4		6
Epilepsy	25	3.17	9	16			3
Neuralgia and neuritis (hysteria, 13; neuritis, chronic, 2; sciatica, chronic, 1)	16	2.03	3	13			2
Other diseases of the system (neurasthenia, 8; others, 8)	16	2.03	3	13			3
Other diseases of the spinal cord (progressive muscular atrophy, 3; multiple cerebrospinal sclerosis, 2; spastic paralysis, 1)	6	.76	4	2			1
Locomotor ataxia	3	.38	2		1		
Paralysis, cause undetermined	2	.25	2				
Chorea	2	.25		2			
Cerebral apoplexy	1	.13		1			1
Diseases of the ears (all otitis media)	24	3.05	11	13		5	2
Diseases of the eyes (trachoma, 3; retinitis, chronic, 3; choroiditis, 2; others, 8)	16	2.03	7	9			2
Diseases of the bones and of the organs of locomotion	99	12.56	20	79		2	9
Diseases of the joints	88	11.17	14	74		2	7
Flat feet	69	8.76	2	67			5
Synovitis, chronic	5	.63	3	2		1	1
Arthritis, chronic	4	.51	4			1	
Hallux valgus	4	.51	1	3			1
Ankylosis	3	.38	3				
Hammer toe	2	.25		2			
Necrosis	1	.13	1				
Diseases of the bones (mastoiditis chronic, 2; osteomyelitis, 2; periostitis, 2)	6	.76	2	4			1
Other diseases (chronic muscular rheumatism, 2; chronic metatarsalgia, 1; others, 2)	5	.63	4	1			1
Diseases of the circulatory system	56	7.11	34	22		4	14
Organic diseases of the heart (chronic endocarditis, 25; valvular disease, 16; chronic myocarditis, 2; cardiac neurosis, 1)	44	5.58	27	17		3	11
Diseases of the veins (phlebitis, 3; hemorrhoids, 1; varicocele, 1)	5	.63	3	2			1
Others of the system (kachycardia, 2; functional disease, 1)	3	.38	1	2			1
Endocarditis acute (endocarditis acute, 1; myocarditis acute, 1)	2	.25	2			1	
Diseases of the arteries (arterial sclerosis)	1	.13	1				
Angina pectoris	1	.13		1			
Diseases of the genito urinary system	39	4.95	12	26	1		13
Diseases of the bladder (enuresis, 19; cystitis, 2)	21	2.66	1	19	1		9
Bright's disease (chronic parenchymatous nephritis, 9; chronic interstitial nephritis, 5)	14	1.78	9	5			3
Other diseases of the kidneys (chronic pyelitis, 2; pyonephrosis, 1)	3	.38	2	1			1
Other diseases of the system (chronic epididymitis)	1	.13		1			

TABLE NO. 7.—*Discharges for disability, year 1912, United States, continental (excluding Alaska)*—Continued.

Causes of discharge.	Number discharged.	Percentage of total discharges for diseases or external causes.	Discharges for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty.
Diseases of the digestive system	35	4.44	12	22	1	1	13
Hernia and intestinal obstructions (inguinal, 19; ventral, 1; omental, 1; obstruction, 1)	22	2.79	4	18	.....	1	11
Other diseases of the intestines (fistula in ano, 2; chronic ulcer of rectum, 1; faecal fistula, 1)	4	.51	3	1	.....	.....	1
Ulcer of the stomach	3	.38	2	1	.....	.....	.....
Diarrhea and enteritis (chronic colitis, 1; chronic gastro enteritis, 1)	2	.25	1	1	.....	.....	1
Others of digestive system (weak abdominal scar and peritoneal adhesion, 1; weakened abdominal muscles following operation, 1)	2	.25	2	.....	.....	.....	.....
Others of the stomach (chronic nervous dyspepsia)	1	.13	.....	1	.....	.....	.....
Diseases of the mouth (aphthous stomatitis)	1	.13	.....	.....	1	.....	.....
Diseases of the respiratory system	17	2.16	7	10	.....	2	3
Chronic bronchitis	7	.89	2	5	.....	.....	1
Diseases of the nasal fossa (chronic atrophic rhinitis)	2	.25	.....	2	.....	.....	1
Pneumonia	2	.25	2	.....	.....	2	.....
Asthma, bronchial	2	.25	.....	2	.....	.....	.....
Pleurisy (chronic fibrinous, 1; serofibrinous, 1)	2	.25	2	.....	.....	.....	.....
Diseases of the thyreoid body (cystic goiter)	1	.13	1	.....	.....	.....	.....
Others of the system (general physical weakness and debility probably due to pulmonary disease)	1	.13	.....	1	.....	.....	1
Diseases of the skin (corns, 3; chronic eczema, 3; trichophytosis, 1; bromidrosis, 1; psoriasis, 1; extensive scar, 1; and horny and deformed nails, 1)	11	1.40	2	9	.....	1	3
Congenital malformations (hyperphonia)	1	.13	.....	1	.....	.....	.....
Ill defined diseases (general physical weakness and debility)	1	.13	.....	1	.....	.....	1
Total for diseases	788	100.00	279	421	88	21	113
EXTERNAL CAUSES.							
Fractures	33	42.86	26	.....	7	.....	.....
Gunshot wounds	13	16.88	9	.....	4	.....	1
Results of injuries incurred prior to enlistment	10	12.99	.....	10	.....	.....	2
Incised wounds	7	9.09	5	.....	2	1	.....
Effects of crushing injuries	4	5.19	2	.....	2	.....	.....
Frostbite	2	2.60	1	.....	1	.....	.....
Dislocations	2	2.60	2	.....	.....	.....	.....
Lacerated wounds	2	2.60	2	.....	.....	.....	.....
Punctured wound	1	1.30	1	.....	.....	.....	.....
Sprain	1	1.30	1	.....	.....	.....	.....
Strain, muscular	1	1.30	1	.....	.....	.....	.....
Ruptured wound	1	1.30	1	.....	.....	.....	.....
Total	77	100.00	51	10	16	1	3
Total diseases	788	91.10	279	421	88	21	113
Total external causes	77	8.90	51	10	16	1	3
Grand total	865	100.00	330	431	104	22	116

DEATHS.

The death rate for disease for the United States was 2.28 per 1,000, as compared with 2.83 in 1911 and 2.30 in 1910. That for external causes was 2.28 in 1912, 1.89 in 1911, and 2.12 in 1910. The total for diseases and external causes was 4.55 in 1912, as compared with

4.72 in 1911, and 4.42 in 1910. The total number of deaths in 1912 was 272; of this number 136 were due to disease and 136 to external causes. Deaths, as well as discharges, which occurred in the United States among those who have been invalided home from their commands in foreign service, have been charged to the country where such commands are stationed. Tuberculosis caused 16 deaths in 1912, and 29 in 1911; measles, 12 in 1912, and 25 in 1911; organic heart disease, 12 in 1912, and 16 in 1911; pneumonia, lobar, 12 in 1912, and 18 in 1911, and nephritis 12 in 1912, and 6 in 1911. There were 47 suicidal deaths in 1912 and 36 in 1911; 16 homicidal in 1912, and 14 in 1911; and 73 accidental in 1912, and 55 in 1911. Of the accidental deaths, drowning caused the largest number, 24 in all. In 1911 there were 13 deaths due to this cause.

TABLE NO. 8.—*Deaths among enlisted troops serving in the United States, continental (excluding Alaska), year 1912.*

Causes of death.	Number.	Ratio per 1,000 of—	
		Mean strength.	Deaths from disease or external causes.
DISEASES.			
Tuberculosis (pulmonary, 13; other organs, 3)	16	0.27	117.65
Measles	12	.20	88.24
Organic heart disease	12	.20	88.24
Pneumonia, lobar	12	.20	88.24
Nephritis (acute, 6; chronic, 6)	12	.20	88.24
Alcoholism (acute, 7; chronic, 2)	9	.15	66.18
Cancer	6	.10	44.12
Meningitis (simple, 2; cerebrospinal, 4)	6	.10	44.12
Broncho pneumonia	4	.07	29.41
Appendicitis	4	.07	29.41
Venereal diseases (syphilis, 2; gonorrhea, 1)	3	.05	22.06
Apoplexy, cerebral	3	.05	22.06
Aneurysm	3	.05	22.06
Rheumatic fever (acute, 1; subacute, 2)	3	.05	22.06
Typhoid fever	2	.03	14.71
Septicemia	2	.03	14.71
General paralysis of the insane	2	.03	14.71
Congestion of the lungs	2	.03	14.71
Peritonitis, general	2	.03	14.71
Dysentery, chronic amoebic	1	.02	7.35
Diabetes, mellitis	1	.02	7.35
Leukaemia	1	.02	7.35
Pernicious anemia	1	.02	7.35
Purpura hemorrhagica	1	.02	7.35
Morphinism	1	.02	7.35
Abscess of brain	1	.02	7.35
Otitis media	1	.02	7.35
Angina pectoris	1	.02	7.35
Arterial sclerosis	1	.02	7.35
Cerebral embolism	1	.02	7.35
Goiter	1	.02	7.35
Chronic interstitial pneumonia	1	.02	7.35
Ulcer of stomach, perforation	1	.02	7.35
Ulcer duodenal, perforation	1	.02	7.35
Enteritis	1	.02	7.35
Cirrhosis of liver	1	.02	7.35
Biliary calculi and multiple liver abscesses	1	.02	7.35
Subphrenic abscess	1	.02	7.35
Gangrene from septic infection, slight wound of hand	1	.02	7.35
Unknown cause	1	.02	7.35
Total for disease	136	2.28	1,000.00

TABLE No. 8.—*Deaths among enlisted troops serving in the United States, continental (excluding Alaska), year 1912*—Continued.

Causes of death.	Number.	Ratio per 1,000 of—	
		Mean strength.	Deaths from disease or external causes.
EXTERNAL CAUSES.			
Suicidal:			
By firearms (rifle, 11; revolvers, 12; shotgun, 1)	24	0.40	176.47
By poisoning (carbolic acid, 7; wood alcohol, 2; arsenic, 1; strychnine, 1; narcotic, 1; bichloride of mercury, 1)	13	.22	95.59
By asphyxiation (illuminating gas)	1	.02	7.35
By strangulation (by use of bed sheet around neck and radiator)	1	.02	7.35
By drowning	4	.07	29.41
By incised wounds (of neck, 3)	3	.05	22.06
By crushing (decapitation by railroad train)	1	.02	7.35
Total suicides	47	.79	345.59
Homicidal:			
By firearms: By civilians, revolver, 3; by comrades, rifle. 2; revolver, 1; by sentry or guard, while trying to escape, revolver, 1; rifle, 1; by non-commissioned officer for interference while in the discharge of his duties, revolver, 1; by police, revolver, 1; by unknown persons, 2	12	.20	88.24
By cutting and piercing instruments: Knife wound of neck in a drunken brawl while acting as peacemaker, 1; knife wound between ribs (while absent without leave) by another soldier, 1; pocketknife wounds penetrating brain, by another soldier, 1	3	.05	22.06
By other means: Kicked by another soldier in a drunken brawl rupturing brain, 1	1	.02	7.35
Total homicides	16	.27	117.65
Accidental:			
By acute poisoning (by wood alcohol, 6)	6	.10	44.12
By absorption of deleterious gases (ether anaesthesia first stage of, during operation for septic alveolar abscess, 1; asphyxiation, by illuminating gas, 1)	2	.03	14.71
By drowning (while bathing, 10; circumstances unknown, 7; fell from cliff, 1; from railroad bridge, 2; while boating, 1; while watering horse, 1; upsetting of boat, 1; falling overboard with grapling hook, rope around neck and shoulders, 1)	24	.40	176.47
By firearms: accidental (by shot gun, 1; fragment of breach of cannon, 1; rifle, 3; revolver, 2)	7	.12	51.47
By cutting or piercing instruments, accidental (stab wound, accidentally self inflicted by bayonet when drunk)	1	.02	7.35
By fall (concussion of brain by falling over parapet while absent without leave, 1; ruptured kidney with hemorrhage, blown off train while acting as guard, 1; fracture of surgical neck of humerus and shock, fall down stairs in company barracks, 1; fracture of leg by falling while drunk, 1; fracture of skull by falling from tower caused by contact with live wire, 1; fracture of cervical vertebrae, by fall from rings in gymnasium, 1; fracture of cervical vertebrae by fall from horse, 1; fracture of skull, by falling from horse, 2; punctured bladder by falling on sharp stick, 1)	10	.17	73.53
By machinery (fracture of skull due to being caught in revolving gear of 10-inch disappearing rifle, 1)	1	.02	7.35
By crushing (concussion of brain, struck by freight train, 1; fracture of skull, by falling from train, 1; from street car, 1; crushing by being run over by railroad trains, 8; crushing by being run over by loaded wagon, 1; crushing by being run over by automobile truck, 1; crushing by load of lumber falling on him while at work, 1; crushing by mass of earth caving in on him while at work, 1; crushing by fall in aeroplane, 1; crushing by being struck by trolley car while riding runaway horse, 1; crushing by fall of horse, 1; cause not stated, fracture of skull, 1)	19	.32	139.70
Effects of heat (sunstroke incurred by training for running race in hot sun)	1	.02	7.35
Lightning, lightning strokes	2	.03	14.71
Total accidental	73	1.22	536.76
Total external causes	136	2.28	500.00
Deaths from disease	136	2.28	500.00
Deaths from external causes	136	2.28	500.00
Grand total	272	4.55	1,000.00

PREVALENCE OF SPECIAL DISEASES.

TYPHOID FEVER.

Eighteen cases of typhoid fever (officers and enlisted men) occurred during the year in the Army stationed within the geographical limits of the United States with 3 deaths, as compared with 44 cases with 6 deaths in 1911; 142 with 10 deaths in 1910; and 173 with 16 deaths in 1909. Fifteen of the cases with 2 deaths occurred among enlisted men, and 3 cases with 1 death among officers. The following table shows the distribution at the different posts, with the days lost and the number constantly sick:

TABLE No. 9.—*Typhoid fever at military stations, United States (continental), officers and enlisted men, year 1912.*

	Cases.	Days treated.	Constantly sick.	Died.
Jefferson Barracks, Mo	3	312	0.85	.....
Columbus Barracks, Ohio	2	88	.24	1
Washington, D. C., attending surgeon's office	[1] 2	129	.35	[1] 1
Washington Barracks, D. C	[1] 1	73	.20	.....
Fort Oglethorpe, Ga	2	85	.23	.....
Fort Slocum, N. Y	1	117	.32	.....
Fort Williams, Me	1	56	.15	.....
Fort Leavenworth, Kans	1	55	.15	.....
Fort Wayne, Mich	1	27	.07	.....
Fort McDowell, Cal	1	[2] 5	.01	.....
Field, central division, Las Cienegas, N. Mex	[3] 1	13	.04	1
Field, western division, Camps, Cal	[4] 1	55	.15	.....
Field, western division, Douglas, Ariz	[5] 1	87	.24	.....
Fort Porter, N. Y., remaining from last year	.....	26	.07	.....
Fort Sam Houston, Tex., remaining from last year	.....	18	.05	.....
Army and Navy General Hospital, Hot Springs, Ark., remaining from last year	.....	13	.04	.....
Fort Logan, Colo., remaining from last year	.....	1	.003	.....
Total	18	1,160	3.17	3

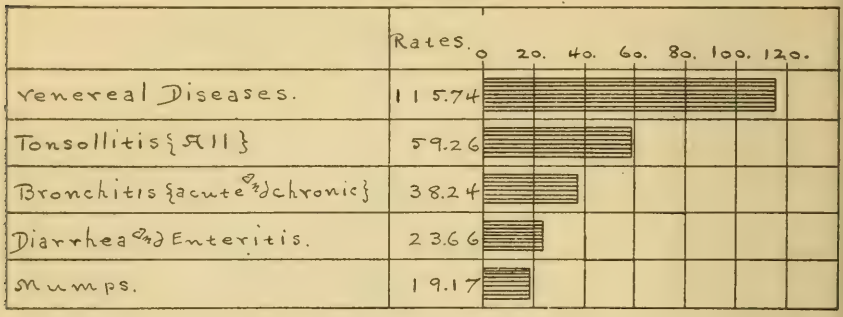
[1] Treated at the Walter Reed General Hospital.
[2] Term expired and soldier discharged at his own request before recovery.
[3] Treated at Fort Bliss, Tex.
[4] Treated at Fort Rosecrans, Cal.
[5] Treated at Fort Huachuca, Ariz.

The admission and death rates for this disease (officers and enlisted men) were 0.29 and 0.0475, respectively, as compared with 0.76 and 0.10 for 1911. The case mortality was 16.6 per cent, which is apparently quite high. It must be obvious, however, that when the number of cases of any of the serious infectious diseases is so small the case mortality rate is liable to fluctuate greatly and has little importance. The following list shows for the entire Army, officers and enlisted men, American and native troops, the place and date of the occurrence of each case of typhoid and paratyphoid fever, whether the typhoid prophylactic had been given, the result of the attack and such other information as is considered necessary under remarks.

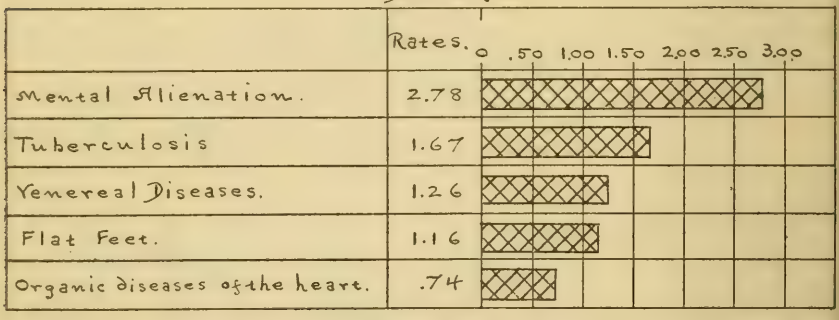
Chart O.

Admission, Discharge, Death and Noneffective Rates for Diseases having the highest rates for the United States {Enlisted men} year, 1912.

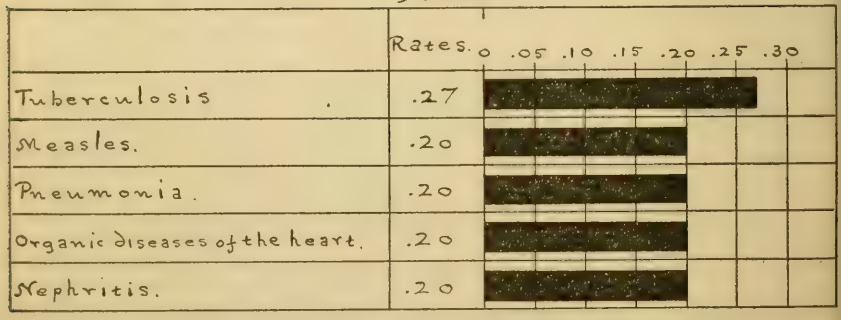
Admissions.



Discharges.



Deaths.



Noneffective.

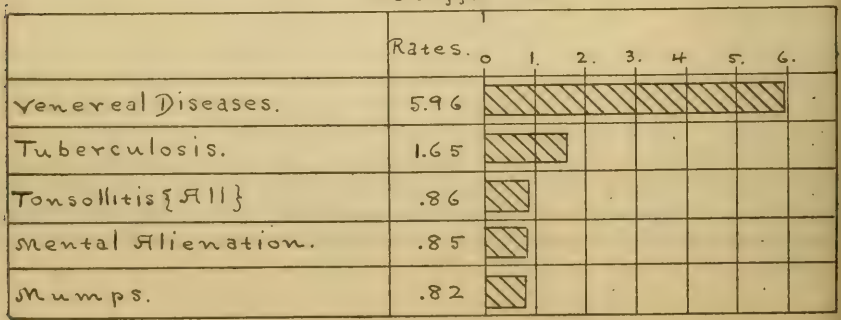
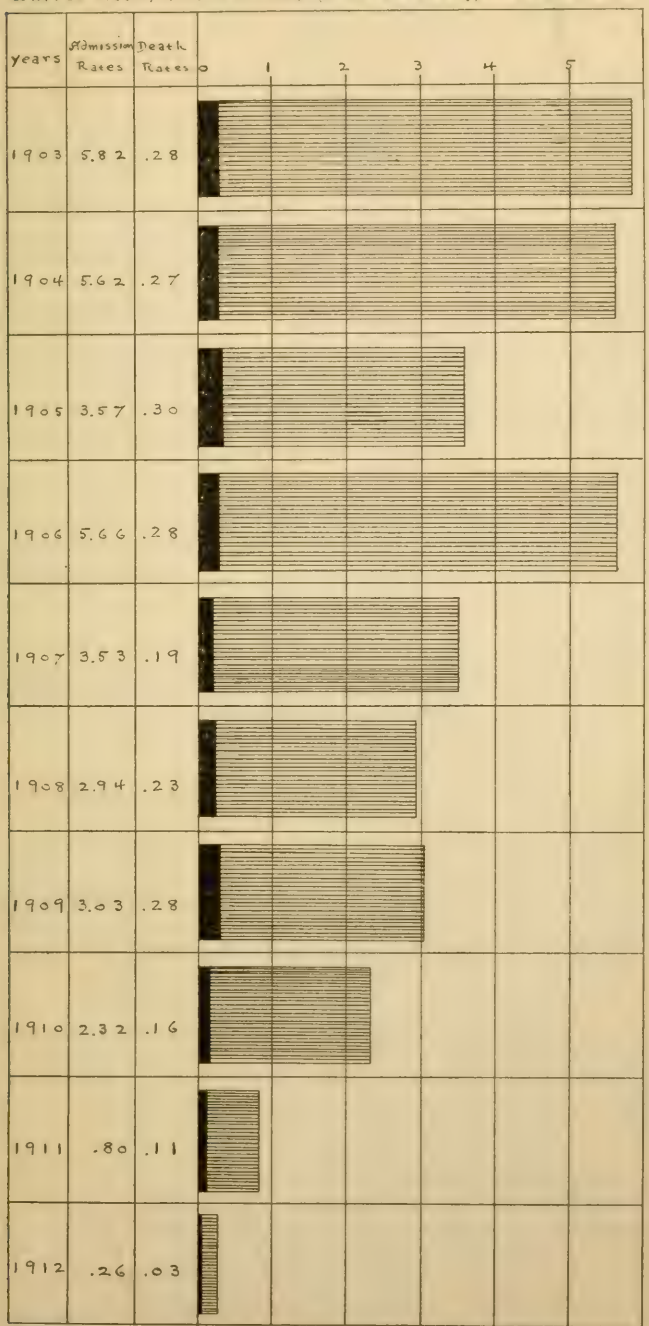


Chart P.

Typhoid Fever
Admission and Death Rates

Admission and Death Rates for Typhoid Fever for the United States, American Troops: Enlisted Men; years, 1903-1912.



Anti-typhoid vaccination begun voluntarily in 1909 was made compulsory in 1911.

TABLE NO. 10.—*Typhoid fever, United States Army (all), 1912.*

	Place of occurrence.	Date when admitted to hospital.	Had typhoid prophylactic been given?	Result.	Remarks.
	AMERICAN TROOPS, UNITED STATES.				
1	Fort McDowell	Jan. 8	No	Recovered	Casual, just arrived from Philippine Islands, where had not received prophylactic.
2	Fort Slocum	Feb. 1	Yes	do	
3	Columbus Barracks	Feb. 8	No	Died	Infection prior to enlistment.
4	do	Mar. 5	No	Recovered	Do.
5	Army Medical School (officer)	Mar. 20	No	do	Had not received prophylactic, for special reasons.
6	Camp, United States troops Campo, Cal.	June 4	Yes	do	
7	Lima, Ohio (on duty with Ohio National Guard).	do	No	do	On detached service and had not received prophylactic.
8	Jefferson Barracks	June 24	No	do	Infection prior to enlistment.
9	Camp, United States troops, Douglas, Ariz.	July 2	No	do	Stated that he had had typhoid fever to escape administration of prophylactic.
10	Fort Williams, Me	Aug. 3	Yes	do	
11	Washington, D. C. (officer)	Aug. 26	No	Died	Had pulmonary tuberculosis and hence had not received prophylactic.
12	Fort Oglethorpe	Aug. 30	Yes	Recovered	
13	Jefferson Barracks	Sept. 8	No	do	Infection prior to enlistment.
14	do	Oct. 5	No	do	Do.
15	Fort Leavenworth	Oct. 15	Yes	do	
16	Washington Barracks	Oct. 18	Yes	do	
17	Camp, United States troops, Las Cienegas, N. Mex.	Oct. 27	No	Died	Had not received prophylactic, through oversight.
18	Fort Oglethorpe (officer)	Dec. 19	No	Recovered	Had typhoid fever in childhood.
	AMERICAN TROOPS, PHILIPPINE ISLANDS.				
1	Camp Keithley	Apr. 14	No	Recovered	Infected while in the field. On duty in the field and prophylactic not administered.
2	do	Apr. 23	No	do	Do.
3	do	Apr. 29	No	do	Do.
4	do	May 11	No	do	Do.
5	do	May 15	No	do	Do.
	AMERICAN TROOPS, HAWAII.				
1	Schofield Barracks	Apr. 15	Yes	Recovered	
	NATIVE TROOPS, PHILIPPINE ISLANDS.				
1	Tucuran	Feb. 20	No	Recovered	Reason for prophylactic not being administered not known.
2	Camp Gregg	July 9	No	Died	Do.
3	Malolos, Bulacan	Aug. 16	Yes	Recovered	

PARATYPHOID.

	AMERICAN TROOPS, UNITED STATES.				
1	Fort Crook	Feb. 5		Recovered	
2	Fort Niagara	May 26		do	
3	Fort Thomas	Oct. 7		do	
	AMERICAN TROOPS, PHILIPPINE ISLANDS.				
1	Augur Barracks	Dec. 7		Recovered	

The following is a tabulation of these cases:

ABLE No. 11.—*Typhoid and paratyphoid fever, United States Army, officers and enlisted men, American and native troops, calendar year 1912.*

	Cases.		Deaths.		Immunized persons.	
	Number.	Rates for 1,000 mean strength.	Number.	Rates for 1,000 mean strength.	Cases.	Deaths.
TYPHOID FEVER.						
nited States	18	0.29	3	0.0475	6	0
laska	0	0	0	0	0	0
hilippine Islands:						
American troops	5	0.38	0	0	0	0
Native troops	3	0.55	1	0.182	1	0
hina	0	0	0	0	0	0
awaii	1	0.28	0	0	1	0
anama	0	0	0	0	0	0
orto Rican regiment	0	0	0	0	0	0
ransports	0	0	0	0	0	0
Total Army	27	0.31	4	.044	8	0
PARATYPHOID FEVER.						
nited States	3	0.05	0	0	.....	.....
hilippine Islands: American troops	1	0.076	0	0	.....	.....
Total (paratyphoid)	4	0.045	0	0	.....	.....

It will be noticed from the total tabulation above that, as in 1911, ot a single epidemic of this disease occurred in the United States uring the year. At only two posts in the United States did ore than one case occur during the year, and at these two posts, olumbus Barracks and Jefferson Barracks, the cases were all in ecruits infected prior to enlistment, and not more than one occurred n any one month. In the Philippine Islands among American troops he disease appeared at only one post, Camp Keithley. Here the en had been in the field for several months and were infected there. hey had not been immunized. The prophylactic had been asked or some months before, but when it was received the troops were in cattered detachments in the field, and it was considered impracti- able to immunize them. Five of the cases in the United States ere in recruits recently enlisted, who were in incubation period hen enlisted. The following tabulation is for the purpose of com- aring the figures for 1911 and 1912.

yphoid fever, United States Army, officers and enlisted men, American and native troops.

	Cases.		Deaths.		Immunized persons.	
	Number.	Rates per 1,000 mean strength.	Number.	Rates per 1,000 mean strength.	Cases.	Deaths.
11	69	0.85	8	0.09	11	1
12	27	.31	4	.044	8	0

(NOTE.—See footnote, page 237, pertaining to table on page 51, Report 1912.)

Special attention is invited to chart P, page 51, showing the admissions and death rates for enlisted men only for the United States. This chart shows graphically the remarkable decrease in both rates as the result of the use of the typhoid prophylactic. This immunization was begun, but was voluntary, in 1909, and was made compulsory for the entire Army late in 1911. (See the annual report of this office for 1912, pp. 52 et seq., for the various steps from voluntary to compulsory prophylaxis.) Chart R, page 56, is a graphic portrayal of the admission rates for malarial fevers, undetermined fevers, and typhoid fever for the United States. This chart shows that there has been a steady reduction in the rates for malaria and undetermined fevers, as the result of sanitary measures, but not so marked as the decrease in the rate of typhoid fever, the result of improved sanitation and typhoid prophylaxis. It must be especially emphasized that there has been no lessening of the efforts in the Army to prevent, by improved sanitary measures, the occurrence of typhoid infection. Advances in the other sanitary measures have gone on, hand in hand, with the extension of the typhoid prophylaxis. It is believed that the typhoid prophylaxis is as potent a preventive against typhoid as vaccination is against smallpox. Vaccination is certainly a reliable measure for the prevention of smallpox, and yet few would advocate the abolition of other needful sanitary measures. From chart R it is also apparent that typhoid fever in the Army is not being incorrectly diagnosed and placed under the head of other fevers.

It has now been clearly demonstrated that the immunization against typhoid fever by the use of typhoid prophylactic is a thoroughly practical measure for the prevention of this disease; that it is unattended by bad results, and that its protective value is very probably equal to that afforded against smallpox by vaccination.

It was stated in the 1912 report that since the beginning of the year 1912 each case as it is reported has been carefully investigated. Surgeons are required to furnish a complete history of every case, giving in detail the methods used in arriving at the diagnosis. This office insists that in each case, if possible, the diagnosis be confirmed by a blood culture or by a culture from the feces or urine. Since the Widal reaction occurs in practically all persons who have received the prophylactic and persists in the blood for some time thereafter, it can not be considered as positive evidence of the presence of typhoid fever in an immunized person. It is recognized that it is not possible in every case of typhoid fever to confirm the diagnosis by cultures and it is not the practice of this office to refuse to accept such a diagnosis when the clinical findings are clear. It is believed, however, that in practically all the cases of typhoid fever it should be possible to isolate the organisms either from the blood or from the urine or feces at some time during the course of the disease. Every case reported is carefully followed up. In two instances in 1912 the surgeons were advised to report cases as typhoid when the laboratory reports were negative, and when they were inclined to report the disease under another head. In only one instance was it necessary to advise the surgeon to change a diagnosis from typhoid to something else. In this case all the evidence was against the case being typhoid.

The results of this campaign bid fair to be even more brilliant in 1913 than in 1912. During the first six months of 1913, so far as can be determined from the information on hand at this date (August 1),

Chart Q.

Typhoid Fever.
Noneffective Rates.
Noneffective Rates for Typhoid Fever for the Army{Officers, American Troops, Porto Ricans and Philippine Scouts}, 1903-1912.
Includes Paratyphoid Fever.

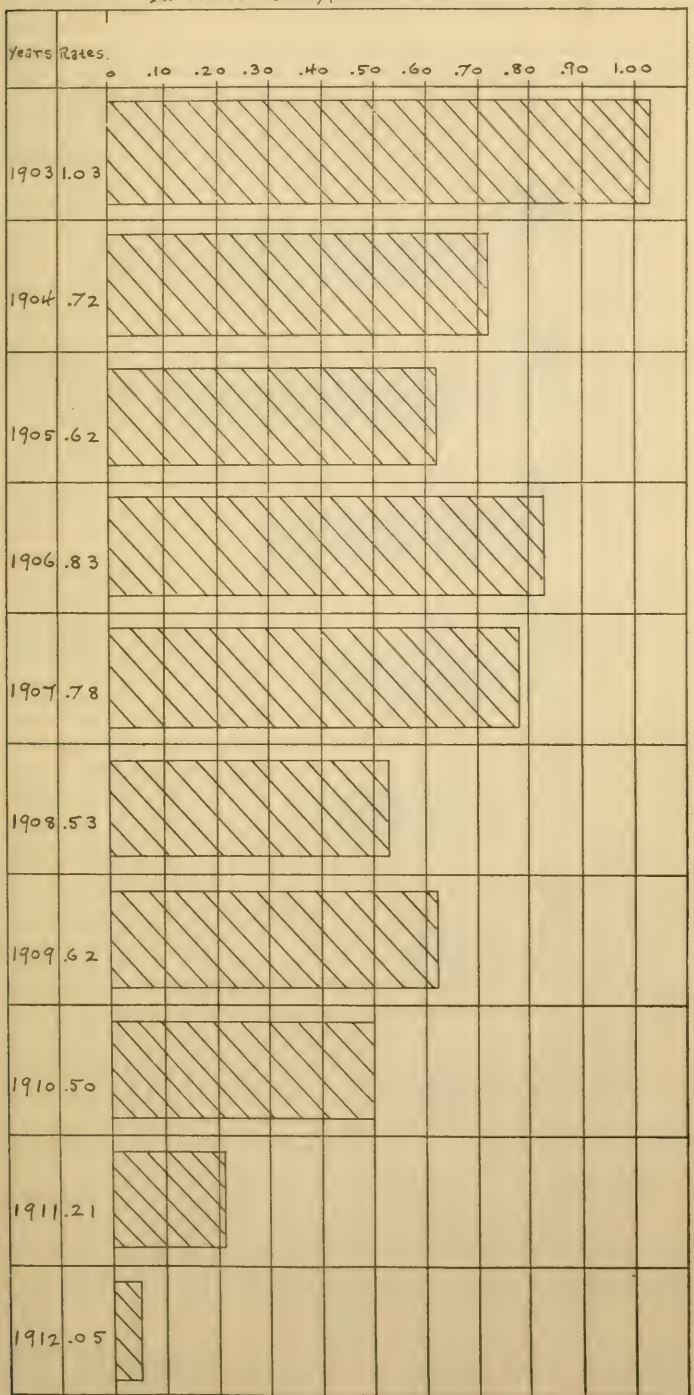
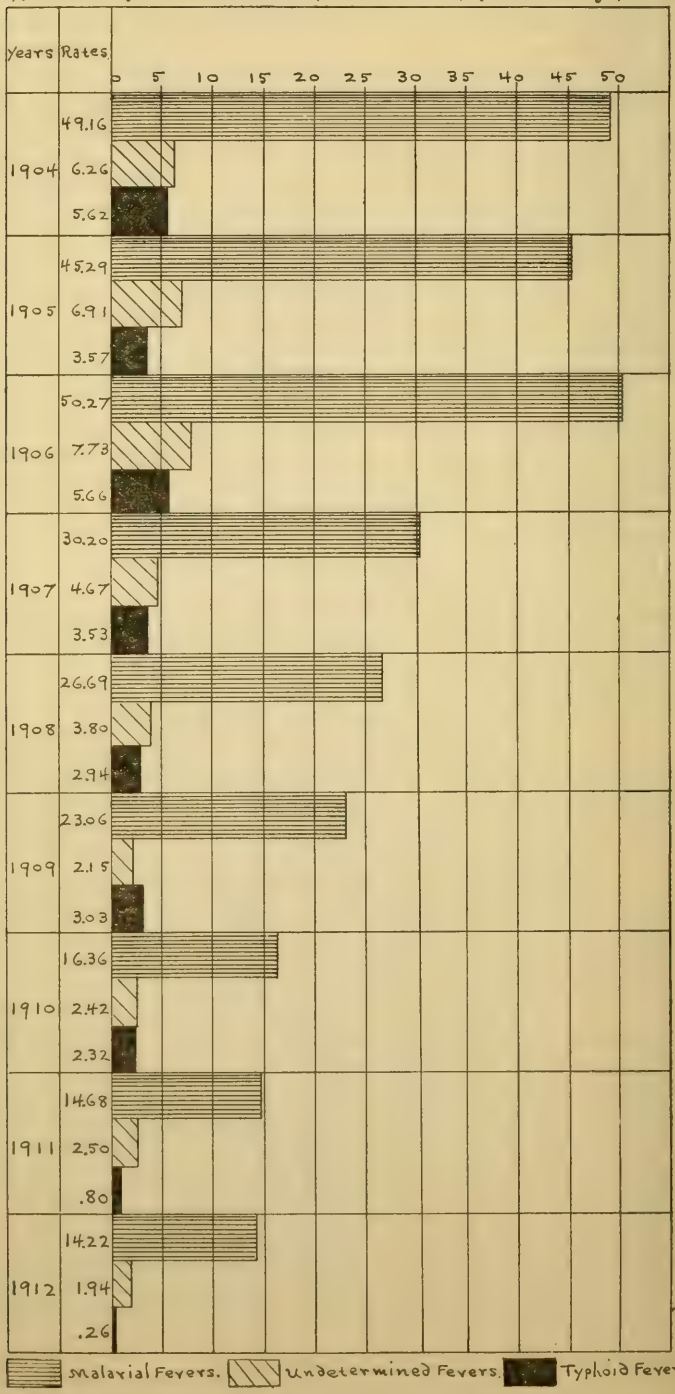


Chart R.

Malarial Fevers, Undetermined Fevers, Typhoid Fever.
Admission Rates.

Admission Rates for Malarial Fevers, Undetermined Fevers, and Typhoid Fever for the United States, American Troops, Enlisted Men, 1904-1912.



not a single case has occurred in the Army stationed in the United States, Hawaii, Porto Rico, Panama, Alaska, or Philippine Islands. The last admission for this disease in an enlisted man was October 27, 1912. During the same period in 1912 in the United States there were 8 cases with 1 death, and in 1911, 24 cases with 5 deaths.

Reimmunizations with the typhoid prophylactic are now carried out upon reenlistment in the same way as revaccination against smallpox. The duration of the immunity is not yet known, but it is improbable that it is longer than that conferred by vaccinia against smallpox, and therefore reimmunization at the beginning of each enlistment period is believed to be necessary.

It is again recommended that when it may become necessary to mobilize either the militia or volunteer troops in the field that this measure be made compulsory for them. As was stated in the last report of this office, in case this is done it is believed that it will be impossible in future for large epidemics of typhoid fever to occur in the United States Army. An occasional case will develop, but typhoid fever will cease to be a scourge to the Army in the future as it was in the past, and will disappear even as smallpox has practically disappeared in armies as the result of vaccination. Among the sanitary achievements of the Medical Department in preventive medicine since the time of the Spanish-American War this sanitary measure for the prevention of typhoid fever should rank second in importance only to the discovery of the method of transmission of yellow fever.

VENEREAL DISEASES.

Four years ago, compelled by the fact that the venereal diseases were the only infectious diseases which showed no tendency to diminish and had become the greatest source of disability, this office began to urge the application to them of the principles of preventive medicine. The campaign was first taken up through the chief surgeons and post surgeons, suggesting that they enlist the interest and cooperation of commanding officers, and also suggesting the lines along which their activities should be directed, which were in general terms: (1) The encouragement of wholesome recreations at military posts which would keep soldiers from seeking amusement at vile resorts; (2) the instruction of the men by lectures and personal advice whenever opportunity offered as to the nature of venereal diseases, the extent of their prevalence among prostitutes, and the grave dangers caused by them, not only to the men infected but to their families; (3) the importance of early detection of cases of venereal diseases by periodical physical examinations of the men, and the importance of keeping cases under continuous observation and treatment until cured; (4) finally, approved measures of personal prophylaxis were suggested for those who would, contrary to advice, expose themselves to venereal infection. The widest latitude was given the medical officers as to the method of prophylaxis which should be employed, the importance of personal cleanliness was emphasized, and such medicinal preparations as were desired for personal disinfection after exposure were freely furnished.

For the last three years a report has been asked for through The Adjutant General from each post commander and post surgeon as to the success of the measures suggested, with a request for suggestions

as to their improvement. The number of officers interested in this propaganda has steadily increased and through these reports the most practicable and efficient methods have been gradually evolved until last year for the first time the War Department was brought to see the necessity for official action, which was taken by General Order No. 17, dated May 31, 1912, published in full in the Annual Report of the Surgeon General for 1912. By this order the hospital method of personal prophylaxis for soldiers who had exposed themselves to venereal infection was formally adopted as the only one which was susceptible of enforcement by military authority.

The preventive measures to be taken under this order were described in detail in a circular of this office, which was, however, not published but furnished confidentially to medical officers through post commanders by the War Department. It is regretted that this circular was made confidential, because the efforts of the military authorities to check the venereal plague have not only caused no adverse criticism but have been followed by much sympathetic interest by sanitary officials and other persons interested in this aspect of municipal hygiene as well as those interested in the health and well-being of the Army, and this office has received many letters of inquiry as to the details of methods pursued and their success, which information it was somewhat difficult to give in detail on account of the confidential character given to it.

The stamp of official approval given by General Orders 17 to the campaign against venereal diseases was rendered more effective by action taken by Congress in the Army appropriation bill and published to the Army by General Orders 31, to stop the pay of officers and enlisted men in active service who should be absent from duty on account of disease resulting from their intemperate use of drugs or alcoholic liquors or other misconduct. The phrase "other misconduct" is understood and construed to refer to the contraction of venereal diseases. It was held by this office that this legislation constituted a modification of the enlistment contract and therefore was applicable to all enlisted men in active service, but the Judge Advocate General took the view, in which he was sustained by the comptroller, that the legislation was penal in character and therefore did not affect individuals whose misconduct, resulting in the contraction of venereal disease, had occurred prior to the date of approval of the act, August 24, 1912, or to those who contracted these diseases prior to enlistment. Although this construction has complicated the operation of the law by creating a privileged class of venereal patients to which the law does not apply, the number of such individuals will steadily diminish with the lapse of time, and it is almost the unanimous opinion of the Army that this legislation has been productive of great good. It is gratifying, therefore, to be able to report for the first time in a number of years a marked improvement in the venereal rates. This improvement is shown in all three of the venereal diseases and throughout the Army, although it has been more marked in the United States than in the Philippine Islands.

The following tables give the occurrence of venereal diseases in the Army by comparative rates for the past five years for each of these diseases in the United States. In these tables, as in the statistical tables in the back of this report, readmissions for the same venereal infection have not been counted for the year 1912, so that hereafter

admissions will be synonymous with cases. Days lost on readmissions, however, have been counted in all cases in calculating days lost and the constantly sick rate.

TABLE No. 12.—*Venereal diseases, entire Army and United States proper, enlisted men, compared for years 1910, 1911, and 1912.*

	Entire Army (enlisted men).			United States proper (enlisted men).		
	1912	1911	1910	1912	1911	1910
Original admissions (cases) per 1,000 of mean strength.	136.70	163.49	154.91	115.74	145.29	137.98
Constantly noneffective rate	7.78	10.14	11.51	5.96	8.82	10.14

TABLE No. 13.—*Venereal diseases. Admissions and discharges, Army, American troops (enlisted men), year 1912.*

	Mean strength.	Syphilis.				Chancroids.			
		Admissions.		Discharges.		Admissions.		Discharges.	
		Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
United States	58,374	1,493	25.58	37	0.62	1,173	20.09	2	0.03
Alaska	1,197	9	7.52	1	.83	4	3.34	.....	.....
Hawaii	3,376	138	40.88	4	1.18	89	26.36	.....	.....
Philippines	12,357	528	42.73	5	.40	832	67.32	.....	.....
China	1,097	32	29.17	.....	.....	109	99.36	.....	.....
Panama Canal Zone	773	10	12.94	1	1.29	25	32.34	.....	.....
Army transports	1,093	14	12.81	.....	.....	35	32.02	.....	.....
Total	78,267	2,224	28.42	48	.60	2,267	28.96	2	.03

	Gonorrhea.				Total.			
	Admissions.		Discharges.		Admissions.		Discharges.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
United States	4,090	70.07	36	0.60	6,756	115.74	75	1.26
Alaska	37	30.91	.....	.....	50	41.77	1	.83
Hawaii	188	55.69	5	1.48	415	122.93	9	2.67
Philippines	1,719	139.11	9	.73	3,099	249.17	14	1.13
China	82	74.75	.....	.....	223	203.28	.....	.....
Panama Canal Zone	18	23.29	.....	.....	53	68.56	1	1.29
Army transports	74	67.70	.....	.....	123	112.53	.....	.....
Total	6,208	79.32	50	.63	10,699	136.70	100	1.26

	Total days.	Constantly sick.	Ratio per 1,000.
Syphilis	56,420	154.15	1.97
Chancroids	47,045	128.54	1.64
Gonorrhea	119,573	326.70	4.17
Total	223,038	609.39	7.79

TABLE No. 14.—*Venereal diseases, by years, 1908 to 1912, United States continental (excluding Alaska), enlisted men.*

[Ratio per 1,000 of mean strength.]

	Number of cases (after deducting recurrent admissions).	Admitted.			Discharged on certificate of disability.			Died.			Noneffective.		
		Total.	White.	Colored.	Total.	White.	Colored.	Total.	White.	Colored.	Total.	White.	Colored.
Gonorrhea and results:													
1912 [1]	70.07	70.07	69.87	74.36	0.60	0.61	0.40	0.02	0.02	....	3.26	3.27	2.94
1911	85.37	94.52	94.48	95.12	.79	.84	....	....	....	....	4.68	4.72	3.93
1910	91.22	102.44	102.17	107.17	.77	.78	.67	....	....	....	5.90	5.98	4.41
1909	105.86	125.27	124.49	147.37	1.36	1.34	2.08	....	....	....	7.22	7.23	7.02
1908	108.68	123.50	123.05	151.93	1.06	1.08	....	....	....	....	6.71	6.72	6.18
Chancroid:													
1912 [1]	20.09	20.09	20.52	10.45	.03	.03	....	....	....	....	1.01	1.03	.50
1911	23.55	25.04	25.22	21.82	....	....	....	....	....	....	1.32	1.34	1.05
1910	24.23	26.42	25.83	36.84	....	....	....	....	....	....	1.53	1.51	1.86
1909	23.49	25.33	25.09	32.13	....	....	....	....	....	....	1.54	1.52	2.03
1908	26.49	28.20	27.64	63.54	.04	.02	1.32	....	....	....	1.75	1.71	4.38
Syphilis:													
1912 [1]	25.58	25.58	25.84	19.69	.62	.61	.80	.03	.03	....	1.70	1.68	2.11
1911	36.37	44.30	45.33	25.91	.52	.48	1.36	.11	.11	....	2.82	2.85	2.30
1910	22.54	26.65	26.68	26.12	1.13	1.16	.67	.04	.04	....	2.71	2.75	2.07
1909	22.01	26.85	26.47	37.74	1.92	1.81	5.19	....	....	....	2.68	2.64	3.74
1908	19.99	23.15	22.46	66.30	1.62	1.64	....	.04	.04	....	2.17	2.14	3.46
Total venereal:													
1912 [1]	115.74	115.74	116.24	104.50	1.26	1.26	1.21	.05	.05	....	5.96	5.98	5.55
1911	145.29	163.85	165.03	142.85	1.31	1.31	1.36	.11	.11	....	8.82	8.91	7.29
1910	137.98	155.51	154.69	170.13	1.90	1.94	1.34	.04	.04	....	10.14	10.25	8.34
1909	151.35	177.46	176.04	217.24	3.28	3.14	7.27	....	....	....	11.44	11.39	12.79
1908	155.17	174.84	173.14	281.77	2.73	2.75	1.38	.04	.04	....	10.63	10.57	14.02

[1] Recurrent admissions were not tabulated in year 1912.

It will be seen from these tables that the rate for venereal diseases (cases) for the United States, continental, was 115.74 per 1,000 for 1912, as compared with 145.29 for 1911. There were 516 cases of syphilis less than last year. In gonorrhea the number of cases is 626 less than last year, and in the local infection, chancroids, the diminution is 128. It was explained in the last report that the large increase in the number of cases of syphilis reported was ascribed to the improvements in diagnostic methods caused by the general use of the Wassermann test during 1912. In 1912 there was a large falling off in the number of secondary and tertiary cases of syphilis with a slight increase in the case rate for the primary cases. In comparing the figures for 1911 and 1912, and especially 1912, with the preceding years, it must be borne in mind that the diagnosis prior to 1911 was made without the advantage of the Wassermann reaction. These figures, therefore, include latent cases which are now detected by it, and which were largely missed prior to 1911. The slight increase in the rate for primary syphilis for 1912 was no doubt caused by the increased accuracy of diagnosis, due to the demonstration of the spirochaeta pallida in the early stages. Additional value is given to the venereal rates for 1912 by the fact that now under the operations of General Order 17, bimonthly physical examinations of troops are held throughout the Army and concealed cases which were in former years probably quite numerous are now reduced to a minimum. The fact that the total venereal rates in spite of these factors tending to swell them show a decided reduction over previous years must be regarded as an important achievement of preventive medicine.

TABLE NO. 15.—*Syphilis, United States (continental), excluding Alaska, years 1908–1912, enlisted men.*

[Ratio per 1,000 of mean strength.]

Year.	Primary syphilis.			Secondary syphilis.			Tertiary syphilis.			Hereditary syphilis.			Total.		
	Case rates.	Admission rates.	Noneffective rates.	Case rates.	Admission rates.	Noneffective rates.	Case rates.	Admission rates.	Noneffective rates.	Case rates.	Admission rates.	Noneffective rates.	Case rates.	Admission rates.	Noneffective rates.
1912[1]	3.89	3.89	0.18	19.01	19.01	1.20	2.50	2.50	0.31	0.17	0.17	0.01	25.58	25.58	1.70
1911	3.75	4.09	.26	28.66	35.54	2.14	3.64	4.29	.43	.33	.38	.02	36.37	44.30	2.85
1910	3.34	3.24	.23	17.26	19.96	2.00	1.83	2.01	.36	.11	.12	.01	22.54	25.33	2.60
1909	3.15	3.20	.24	17.09	21.67	2.17	1.75	1.96	.27	.02	.02	.0001	22.01	26.85	2.68
1908	2.46	2.57	.14	15.48	18.31	1.71	2.05	2.27	.31	.....	.....	.....	19.99	23.15	2.17

[1] Recurrent admissions not tabulated in year 1912.

In studying the total venereal rate in the United States, continental, for 1912, by quarters, it is seen that the improvement has been progressive. Thus for the first quarter of the calendar year, before the issue of General Order 17, the admission rate was only slightly lower than that of the preceding year, being 130 per 1,000; for the second quarter it was 113; for the third quarter 107, and for the fourth quarter 91 per 1,000. This improvement has been continued into the year 1913.

The noneffective rate for the United States for 1912 is 5.96, as compared with 8.82 for 1911, 10.14 for 1910, and 11.44 for 1909. This rate is the true measure of noneffectiveness produced, and shows in a still more definite and satisfactory way the gain which has been accomplished.

By reference to Table No. 12 it will be seen that the rate for the total Army also showed a very material improvement. The admission rate in 1912 was 136.70, and in 1911, 163.49, while the noneffective rate was 7.78 in 1912 and 10.14 per 1,000 in 1911. As noted elsewhere, the rates in the Philippine Islands did not show as much improvement as the corresponding ones in the United States. The admission rate in the Philippine Islands in 1912 was 249.17 per 1,000, and in 1911, 305.12, while the noneffective rate was 16.55 in 1912 and 16.63 in 1911.

There were no colored troops in the Philippine Islands in 1910 and 1911; therefore the rates for these years are for white troops. The rate for white troops in 1912 was 215.43 per 1,000 for admissions, and 15.92 for noneffectiveness, while that for the colored troops was 524.06 per 1,000 for admissions with a noneffective rate of 21.70. It is thus apparent that the rates for the white troops showed a very satisfactory improvement, but that the rates for the colored troops were exceedingly high.

As above mentioned, The Adjutant General was asked in January to call for a report from the commanding officer of each post and military command as to the results obtained by General Order 17, 1912, with such remarks as to its operation and such suggestions as to improvement as might seem desirable. A study of these reports from 95 posts (some of the smaller posts and arsenals having been omitted) shows that at 69 posts the surgeon thought that the measures taken had been effective in reducing venereal diseases. In 14 the results were stated to be fair or slight, and in 12 they were stated as not

effective. Five of these latter were Coast Artillery posts, at which it was stated that the distance and location of the garrison from the neighboring town was such that it was impossible for men after venereal exposures in town to present themselves for prophylactic treatment within a reasonable length of time and that consequently the treatment was not effective. At the other posts at which the answer was negative it was explained by the statement that the men did not report, or in some cases what was probably a different and more accurate way of stating the same fact, that the officers were indifferent. A study of these reports and the great contrast in the results obtained at posts where commanding officers and surgeons are enthusiastic and optimistic makes it certain that the failure of the men to comply with the provisions of General Order 17 is in direct proportion to the indifference and pessimism of post and organization commanders and post surgeons. The great change that has taken place in the venereal statistics of the recruit depots, excepting Fort Logan, Colo., shown in Table No. 16, is a conclusive evidence of what can be accomplished by an enthusiastic determination to enforce orders and obtain results.

TABLE NO. 16.—*Recruit depots—Total number of admissions, venereal diseases, with ratios and mean strength, officers and enlisted men, years 1910, 1911, and 1912.*

Recruit depots.	Year 1910.			Year 1911.			Year 1912.		
	Admissions.		Mean strength.	Admissions.		Mean strength.	Admissions.		Mean strength.
	Total.	Ratio.		Total.	Ratio.		Total.	Ratio.	
Fort Slocum, N. Y.	177	178.79	990	425	338.92	1,254	196	151.12	1,297
Jefferson Barracks, Mo.	319	318.36	1,002	324	263.63	1,229	165	134.80	1,224
Columbus Barracks, Ohio.	338	317.07	1,066	312	240.93	1,295	167	139.75	1,195
Fort McDowell, Cal.	163	270.76	602	207	253.06	818	78	115.21	677
Fort Logan, Colo.	63	121.39	519	162	274.58	590	149	230.65	646

TABLE NO. 17.—*Venereal diseases—Officers and enlisted men, admissions and ratios per 1,000, for posts of more than 300 men, in the United States (excluding Alaska), year 1912.*

		Relative standing on list previous year.[1]	Admissions.		Mean strength.
			Total.	Ratio.	
1	Fort McPherson, Ga.	1	220	289.09	761
2	Fort Washington, Md.	6	108	216.43	499
3	Fort Sam Houston, Tex.	4	228	210.53	1,083
4	Fort Oglethorpe, Ga.	8	177	209.47	845
5	Fort Benjamin Harrison, Ind.		145	194.89	744
6	Fort Snelling, Minn.	2	184	179.69	1,024
7	Madison Barracks, N. Y.	40	91	170.09	535
8	Fort Moultrie, S. C.	18	76	159.00	478
9	Presidio of San Francisco, Cal. (post)	14	302	151.92	1,988
10	Fort Howard, Md.	9	61	133.77	456
11	Fort Andrews, Mass.	15	57	132.25	431
12	Fort Dupont, Del.	38	73	130.36	560
13	Fort George Wright, Wash.	29	70	125.45	558
14	Fort Strong, Mass.		47	125.00	376
15	Fort Douglas, Utah.	36	108	123.29	876
16	Fort Sill, Okla.	12	119	121.43	980
17	Fort Screven, Ga.	3	56	120.95	463
18	Fort Meade, S. Dak.		56	119.15	470
19	Fort Morgan, Ala.	22	52	118.45	439
20	Fort Clark, Tex.	46	47	117.21	401
21	Fort Williams, Me.	35	69	115.38	598
22	Fort Bliss, Tex.	11	65	114.64	567
23	Monterey, Cal.	24	97	114.12	850

[1] NOTE.—A difference of one below "16" is made in the relative standing on account of dropping out Schofield Barracks, Hawaii.

TABLE NO. 17.—*Venereal diseases—Officers and enlisted men, admissions and ratios per 1,000, for posts of more than 300 men, in the United States (excluding Alaska), year 1912*—Continued.

		Relative standing on list previous year.	Admissions.		Mean strength.
			Total.	Ratio.	
	UNITED STATES (officers and enlisted men)	.....	6,769	110.24	61,405
24	Fort Barrancas, Fla	5	61	109.52	557
25	Fort Leavenworth, Kans	26	228	108.16	2,108
26	Fort Ethan Allen, Vt	34	86	107.63	799
27	Fort Monroe, Va	20	146	106.65	1,369
28	Fort Sheridan, Ill	30	129	106.17	1,215
29	Fort D. A. Russell, Wyo	7	243	105.01	2,314
30	Fort McKinley, Me	17	79	104.22	758
31	Vancouver Barracks, Wash	43	141	102.92	1,370
32	Fort Jay, N. Y	27	42	102.69	409
33	Fort Wayne, Mich	13	54	101.50	532
34	Fort Stevens, Oreg	51	33	99.70	331
35	Fort William H. Harrison, Mont	21	35	98.87	354
36	Fort Des Moines, Iowa	.....	72	98.63	730
37	Fort Huachuca, Ariz	23	33	94.56	349
38	Plattsburg Barracks, N. Y	45	77	94.25	817
39	Fort Riley, Kans	39	183	93.60	1,955
40	Fort Terry, N. Y	48	65	91.29	712
41	Fort H. G. Wright, N. Y	32	61	89.05	685
42	Fort Totten, N. Y	25	65	84.53	769
43	Fort Winfield Scott, Cal	.....	49	80.20	611
44	Fort Myer, Va	31	54	75.63	714
45	Fort Baker, Cal	33	30	75.57	397
46	Fort Lincoln, N. Dak	.....	23	73.96	311
47	Washington Barracks, D. C	37	48	73.96	649
48	Fort Worden, Wash	57	44	68.32	644
49	Fort Flagler, Wash	52	21	67.52	311
50	Fort Casey, Wash	47	21	66.04	318
51	Fort Caswell, N. C	28	22	65.28	337
52	Fort Hancock, N. J	42	48	64.09	749
53	Fort Mackenzie, Wyo	49	35	61.40	570
54	Fort Hamilton, N. Y	16	35	61.30	571
55	Fort Adams, R. I	44	31	54.58	568
56	Fort Lawton, Wash	41	18	51.14	352
57	Fort Greble, R. I	56	16	48.78	328
58	Fort Crook, Nebr	10	25	47.98	521
59	Fort Robinson, Nebr	50	28	47.62	588
60	Fort Barry, Cal	.....	15	47.02	319
61	West Point, N. Y	54	28	35.71	784
62	Fort Yellowstone, Wyo	53	11	27.78	396

TABLE NO. 18.—*Venereal diseases—Army, officers and enlisted men, by departments and divisions, year 1912.*

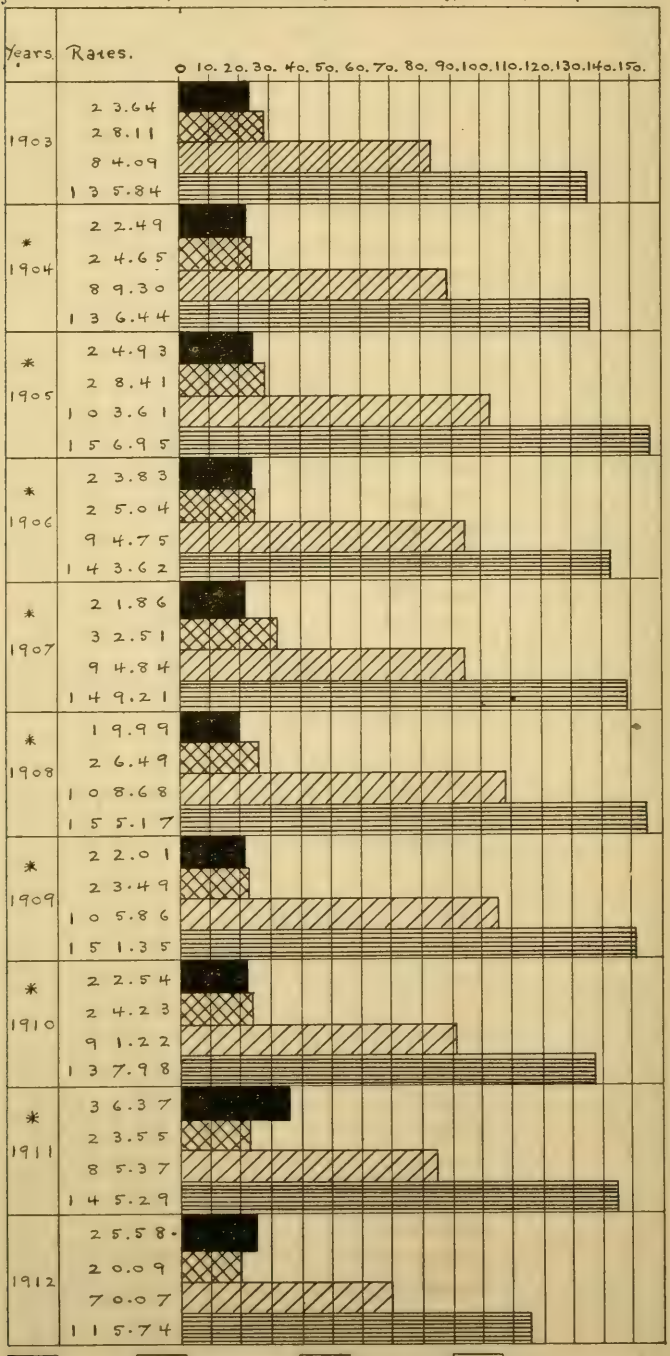
	Mean strength.			Cases.			Rates per 1,000 of mean strength.		
	Officers.	Enlisted men.	Total.	Officers.	Enlisted men.	Total.	Officers.	Enlisted men.	Total.
Army—American troops	4,216	78,267	82,483	22	10,699	10,721	5.22	136.70	129.98
United States (continental), excluding Alaska	3,031	58,374	61,405	13	6,756	6,769	4.29	115.74	110.24
Eastern division	1,070	20,343	21,413	4	2,479	2,483	3.74	121.86	115.96
Central division	1,043	19,226	20,269	3	2,183	2,186	2.88	113.54	107.85
Western division	584	11,904	12,488	3	1,190	1,193	5.14	99.97	95.53
Independent stations	186	1,457	1,643	.....	69	69	.....	47.36	42.00
Recruit depots	110	4,929	5,039	.....	755	755	.....	153.18	149.83
General hospitals	38	515	553	3	80	83	78.95	155.34	150.09
Alaska	54	1,197	1,251	.....	50	50	.....	41.77	39.97
Panama Canal Zone	34	773	807	.....	53	53	.....	68.56	65.68
Hawaii	173	3,376	3,549	.....	415	415	.....	122.93	116.93
China	44	1,097	1,141	.....	223	223	.....	203.28	195.44
Philippine Islands (American troops)	758	12,357	13,115	9	3,079	3,088	11.87	249.17	235.46
Department of Luzon	528	9,186	9,714	5	2,512	2,517	9.47	273.46	259.11
Department of Mindanao	216	3,053	3,269	3	452	455	13.89	148.05	139.19
Division hospital	10	97	107	1	104	105	100.00	1,072.17	981.31
Interisland transports	4	21	25	.....	11	11	.....	523.81	440.00
Army transports	81	1,093	1,174	.....	123	123	.....	112.53	104.77
Philippine Scouts	.....	5,407	5,407	.....	301	301	.....	55.67	55.67
Porto Rican regiment	41	588	629	.....	62	62	.....	105.44	98.57

Chart S.

Syphilis, Chanchroids, Gonorrhea and Total Venereal.

Admission Rates.

Admission Rates for Syphilis, Chanchroids, Gonorrhea and Total Venereal for the United States, American Troops & Enlisted Men, 3 years, 1903-1912.

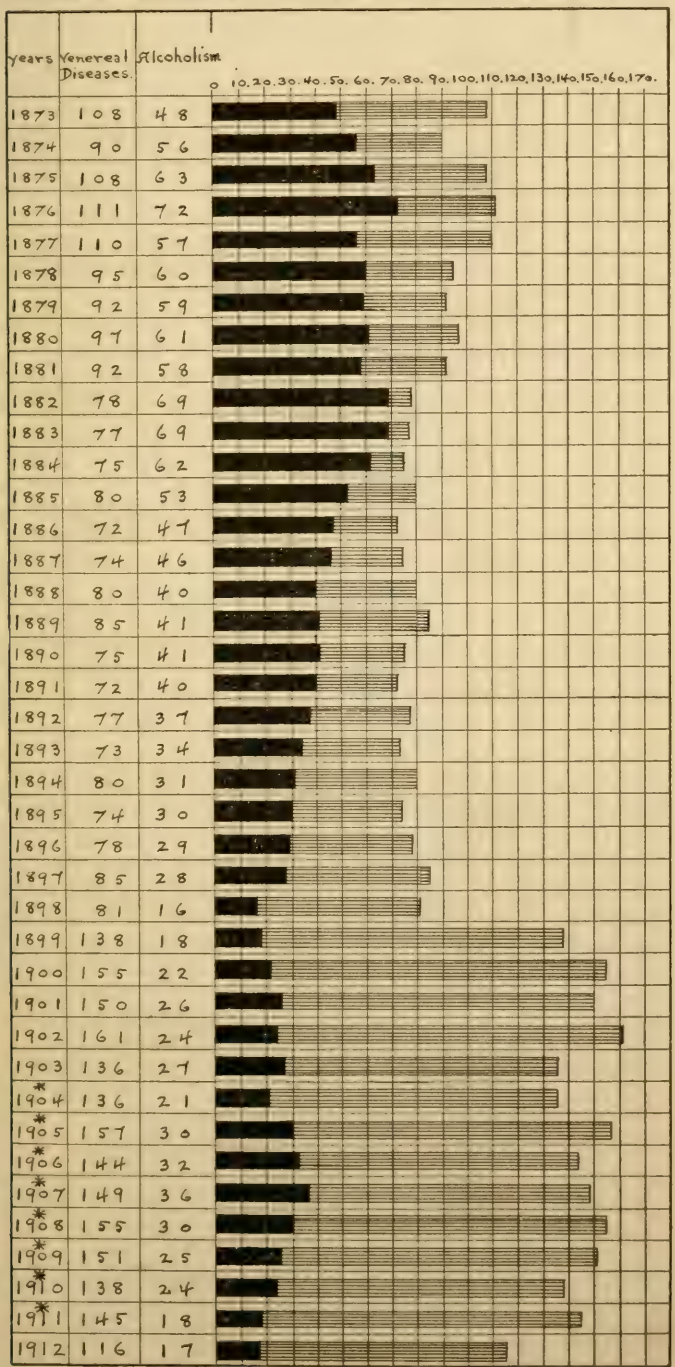


* Readmitted cases deducted to correspond with figures for the years preceding 1904.

Chart T.

Venereal Diseases & Alcoholism.
Admission Rates.

Admission Rates for Venereal Diseases & Alcoholism for the United States, American Troops, Enlisted Men, years, 1873-1912.



* Readmitted cases deducted to correspond with figures for years preceding 1904, and 1912.

Table No. 17 shows the venereal rates at all of the more important military posts in the United States, and an examination of it in comparison with the similar table for last year indicates the extent of the improvement which has been effected. For example, only 9 posts show a rate higher than 135 per 1,000, whereas last year the number showing a rate above 135 was 31. Fort McPherson, which had the bad eminence of being the first on the list in 1911 as well as 1912, had a rate for the former of 465 as compared with 289 for the latter.

In spite of the great improvement in these rates it is believed that the posts at the head of the table have rates which are far too high and which could be greatly reduced by the more careful carrying out of the provisions of General Order 17. This office has, therefore, called the attention of the War Department to those posts having a rate above 150 per 1,000 and has requested that the department commanders be asked to investigate the reasons for their failure to show a marked improvement.

It is believed, therefore, that the time has come to hold commanding officers responsible for excessive venereal rates occurring at their posts, and especially for continued failure on the part of the men of the command to comply with the existing orders on the subject. If this were done and if the officers of the Inspector General's Department and the sanitary inspectors had orders to investigate strictly the results obtained at posts inspected by them and to make special reports in cases where these results are not satisfactory, there is no doubt that a great and permanent improvement could be effected. It is also recommended that post exchanges be required to keep on hand for sale at a cost not to exceed 5 cents each prophylactic packets for the use of men of immoral habits who are going on passes or furloughs under such circumstances as would render prophylactic treatment at the hospital useless on account of the period of time intervening between exposure and the treatment.

RATES FOR 1913.

The figures compiled in this office for all posts in the United States for the first six months of 1913 show that the marked improvement begun in 1912 has continued in 1913. The annual rate for the United States for the first six months of 1913 was 74.67 per 1,000 for all venereal diseases, that for syphilis being 19.84, for gonorrhea 43.00, and for chancroids 11.82. By reference to Chart T it will be observed that this is the lowest rate for venereal disease since 1895. This rate includes all cases occurring, not only all those excused from duty but those taken up for record only, as well as all concurrent cases. The following table shows the number of cases of each disease, with rates:

Venereal diseases—January to June, 1913, United States, continental (exclusive of Alaska).

	Cases on sick report.		Concurrent cases.		Cases for record only (no time lost).		Total.	
	Number.	Ratio per 1,000.	Number.	Ratio per 1,000.	Number.	Ratio per 1,000.	Number.	Ratio per 1,000.
Syphilis	527	16.98	.....	.....	89	2.87	616	19.84
Chancroid	249	8.02	15	0.48	103	3.32	367	11.82
Gonorrhea	950	30.60	15	.48	370	11.92	1,335	43.00
Total	1,726	55.60	30	.97	562	18.10	2,318	74.67

MALARIAL FEVERS.

The occurrence of malarial fever in the United States, as shown by Chart U, continues to decrease. The admission rate for 1912 was 14.22, as compared with 14.68 for 1911, 16.36 for 1910, 23.06 for 1909, and 26.69 for 1908, which in its turn was the lowest on record in this office. This continuous improvement is to be credited not alone to the efforts of medical officers, supported by commanding officers, but also to the liberal provision of wire-gauze screens for doors and windows by the Quartermaster's Corps. The noneffective rate was 0.30 per 1,000, as compared with 0.35 in 1911, 0.36 in 1910, 0.51 in 1909, and 0.58 in 1908.

Table No. 19 shows the relative incidence of the various forms of malarial infection for the past five years. Not a single death has occurred in the Army in the United States from malarial fever since 1906.

TABLE No. 19.—*Malarial infections—United States, continental (excluding Alaska), years 1908 to 1912, inclusive, enlisted men.*

[Ratio per 1,000 of mean strength.]

Malarial fevers.	Admitted.			Discharged on certificate of disability.			Died.			Noneffective.		
	Total.	White.	Colored.	Total.	White.	Colored.	Total.	White.	Colored.	Total.	White.	Colored.
Quartan and tertian:												
1912	12.42	12.89	2.01	.....	.....	.....	.....	.....	.....	0.24	0.25	0.04
1911	13.63	14.36	.68	.....	.....	.....	.....	.....	.....	.29	.30	.01
1910	14.57	15.18	3.68	.....	.....	.....	.....	.....	.....	.28	.29	.06
1909	20.29	20.74	7.65	.....	.....	.....	.....	.....	.....	.41	.42	.13
1908	24.12	24.33	11.05	.....	.....	.....	.....	.....	.....	.49	.49	.14
Estivo-autumnal:												
1912	.96	1.00	.....	.....	.....	.....	.....	.....	.....	.03	.03	.....
1911	.89	.94	.....	.....	.....	.....	.....	.....	.....	.04	.04	.....
1910	1.36	1.39	1.00	.....	.....	.....	.....	.....	.....	.05	.05	.03
1909	1.96	1.99	1.02	.....	.....	.....	.....	.....	.....	.07	.07	.03
1908	2.09	2.11	1.38	.....	.....	.....	.....	.....	.....	.08	.08	.04
Malarial cachexia and undetermined malarial fevers:												
1912	.84	.77	2.41	.....	.....	.....	.....	.....	.....	.02	.02	.01
1911	.16	.17	.....	.....	.....	.....	.....	.....	.....	.02	.02	.....
1910	.43	.46	.....	.....	.....	.....	.....	.....	.....	.03	.03	.....
1909	.80	.83	.....	0.02	0.02	.....	.....	.....	.....	.04	.04	.....
1908	.47	.48	.....	.....	.....	.....	.....	.....	.....	.01	.01	.....
Total malarial diseases:												
1912	14.22	14.65	4.42	.....	.....	.....	.....	.....	.....	.30	.31	.06
1911	14.68	15.47	.68	.....	.....	.....	.....	.....	.....	.35	.36	.01
1910	16.36	17.02	4.69	.....	.....	.....	.....	.....	.....	.36	.37	.09
1909	23.06	23.57	8.67	.02	.02	.....	.....	.....	.....	.51	.53	.16
1908	26.69	26.91	12.43	.....	.....	.....	.....	.....	.....	.58	.59	.18

TABLE No. 20.—*The 10 posts of more than 200 (officers and men) in the United States having the highest admission rates for malarial diseases, 1912 compared with 1911.*

[Ratio per 1,000 of mean strength.]

Posts.	Mean strength.		Malarial diseases—total ratio.	
	1912	1911	1912	1911
Fort Washington, Md	499	420	172.34	333.33
Fort Logan H. Roots, Ark	264	279	90.91	60.93
Jefferson Barracks, Mo	1,224	1,229	90.69	25.22
Washington Barracks, D. C	649	658	84.75	185.41
Fort Bliss, Tex	567	381	58.21	5.25
Fort Clark, Tex	401	301	54.86	16.61
Fort Howard, Md	456	406	46.05	56.65
Fort Caswell, N. C	337	323	38.58	37.15
Fort Crockett, Tex	234	122	38.46	24.59
Fort Ontario, N. Y	205	211	34.15	.....

Fort Washington this year, as for the last several years, has the unenviable reputation of having the highest admission rate for any post in the United States. The rate in 1912 was 172.34 per 1,000 as compared with 333.33 in 1911, 237.29 for 1910, 215.77 for 1909, 144.30 for 1908, 363.64 for 1907, and 736 for 1906. The rate was thus lower than it has been since 1908. The surgeon at this post states, that up to November, 1912, very little of the work recommended by the board for the special study of the subject mentioned in the last report of this office had been done. In the latter part of November the commanding officer issued an order that two companies of the Coast Artillery Corps should be put on fatigue duty five days each week, for the purpose of clearing the ground. An area 125 yards wide was cleared around the entire post. After March 12, 1913, the work being practically complete, the fatigue party was reduced to one company. By May 1 the work was completed. He states that during May, June, and July of this year the cleared area has been kept as clear as possible of undergrowth by prison labor.

In June and July, 1913, the herd of goats recommended by the board was purchased, apparently, however, too late to accomplish any result this year as the undergrowth by this time was too far advanced to be kept down by them.

A search for mosquitoes is made through each barrack building every day by the entire company and all mosquitoes killed. All cases of malarial fevers are carefully protected from mosquitoes and after discharge from hospital are kept under careful observation and treatment for several months. The surgeon reports that:

> At present there are practically no mosquitoes on the reservation, and I believe if we can prevent the men from prowling over the country and getting bitten by infected mosquitoes we can blot out malaria completely at Fort Washington.

The rate for the first six months of 1913, as compared with the corresponding rate for 1911 and 1912 was—

First six months:

1911	39.77
1912	136.20
1913	16.60

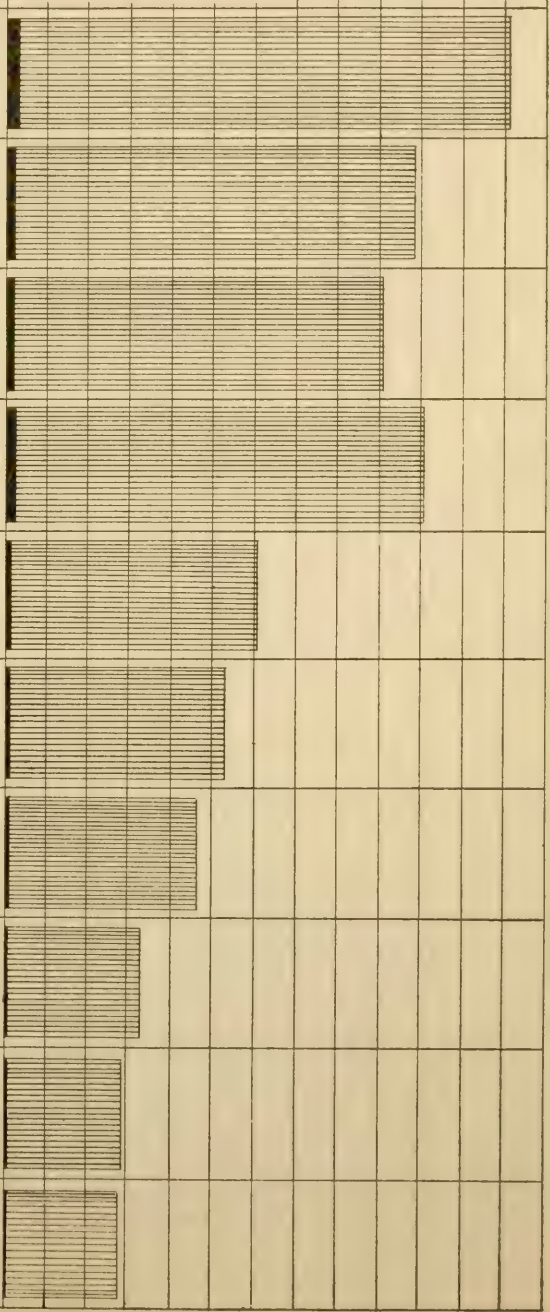
This indicates that the work done is producing good results, though very little inference can be drawn from the figures for the first six months.

Chart U.

Malarial Fevers.
Admission & Noneffective Rates.

Admission & Noneffective Rates for Malarial Fevers for the United States, American Troops {Enlisted Men} years, 1903-1912.

Years.	Admission Rates.	Non-effective Rates.
1903	60.83	1.61
1904	49.16	1.09
1905	45.29	1.02
1906	50.27	1.12
1907	30.20	.63
1908	26.69	.58
1909	23.06	.51
1910	16.36	.36
1911	14.68	.35
1912	14.22	.30



The total admission rate for malarial fevers for the Army was 40.00 The comparative rate for 1911 was 25.18, and for 1910 was 28.99 This increase in the rate for American troops, total Army, when ther was a decrease for the rate in the United States, is due to the as ye unexplained marked increase in the rate for the Philippine Islands the rate there for American troops being 171.00 as compared with 75.5 for 1911. The rate in the Philippines in 1912 was higher than it ha been in any year since 1906, when it was 304.20. This increase ca be attributed to a certain extent to the large amount of field servic which the troops have had in the district of Mindanao. This, how ever, can not explain the general increase in rate, for with the excep tion of Fort Mills, Warwick Barracks, and Torrey Barracks, there wa an increase in the rate at every post in the Philippines occupied b American troops. The Scouts, who were as actively engaged in fiel service as the American troops, showed a slight decrease over last yea the rate for 1912 being 241.91 as compared with 242.12 per 1,000 fo 1911.

A cablegram calling the attention of the commanding genera Philippine Department, to this marked increase in the malarial rat and indicating the necessity of increased attention to this matter b medical officers, was sent by The Adjutant General on June 30 at th request of this office.

TUBERCULOSIS.

The following tabulation shows for the total American Army, an separately for the different countries where the Army has been sta tioned continually, the case rate for tuberculosis (all) for enlisted me for the last five years. In this tabulation all readmissions during eac year have been eliminated, so that the actual occurrence of tubercu losis (all) is shown.

Tuberculosis (all)—Enlisted men cases only.

Year.	United States.	Philippine Islands.	Alaska.	Hawaii.	Transports.	Total.
1912	3.25	5.02	4.18	2.07	2.74	3.
1911	3.64	3.77	2.68	1.99	1.76	3.
1910	3.34	5.46	1.85	4.10	0.80	3.
1909	4.53	5.06	3.76	2.96	3.00	4.
1908	3.99	6.10	2.96	3.92	3.46	4.

It is extremely interesting to note that the case rate for the tota Army, and for that part stationed in the United States and the Philip pine Islands, has steadily diminished year by year during the last fiv years, the only exception being that the rate for the Philippine Island was higher in 1912 than in 1911 when it was abnormally low, and th slight variation from year to year in previous years in the rate for th United States. This decrease is no doubt due to improved sanitatio and to the care with which applicants for enlistment are examined a recruiting depots. Owing to the small average number of men i Alaska, Hawaii, and on transports, the figures for these places are c small value. For Hawaii, however, the rate for 1912 is below th average for the last five years, and that for the transports is lowe than for two out of the other four years.

The following tabulation shows for the total American Army, and for that part stationed in the United States and the Philippine Islands, the rate for tuberculosis (all), for discharges for disability, for deaths, and noneffectiveness for the last three years.

	Year.	Discharged for disability.	Deaths.	Noneffective.
Army, American troops	1912	1.56	0.31	1.40
	1911	2.88	.44	1.35
	1910	4.02	.28	1.60
American troops, United States	1912	1.67	.27	1.65
	1911	2.85	.52	1.63
	1910	4.01	.25	1.87
American troops, Philippine Islands	1912	1.46	.57	.53
	1911	3.77	.08	.29
	1910	4.54	.41	.41

An examination of Table No. 21 showing the occurrence of tuberculosis at Army posts in the United States, shows that Vancouver Barracks had the highest rate in 1912 as in 1911.

TABLE NO. 21.—*Tuberculosis (all) at Army stations, United States, continental (excluding Alaska), year 1912, compared with 1911 and 1910, enlisted men.*

	Admissions.					
	1912		1911		1910	
	Number.	Ratio per 1,000 of mean strength.	Number.	Ratio per 1,000 of mean strength.	Number.	Ratio per 1,000 of mean strength.
Vancouver Barracks, Wash.	23	17.58	22	21.96	9	7.98
Fort Slocum, N. Y.	11	8.64	3	2.44	7	7.24
Fort Sam Houston, Tex.	10	9.65	5	3.10	4	2.51
Columbus Barracks, Ohio	8	6.83	6	4.72	5	4.80
Jefferson Barracks, Mo	8	6.66	2	1.66	5	5.10
Presidio of Monterey, Cal.	7	8.86	1	1.32	2	2.10
Presidio of San Francisco, Cal.	7	3.66	11	5.60	13	5.42
Fort McDowell, Cal.	6	9.13	6	7.52	1	1.72
Fort Leavenworth, Kans.	5	2.52	2	1.63	3	1.55
Fort Andrews, Mass.	4	9.52	1	2.39	1	2.55
Fort Benjamin Harrison, Ind.	4	5.71	1	5.59	6	7.70
Fort D. A. Russell, Wyo.	4	1.83	7	4.29	8	3.48
Fort Flagler, Wash.	4	13.25	1	3.18	1	3.08
Fort Hancock, N. J.	4	5.51			1	1.19
Fort Barry, Cal.	3	9.65			2	6.62
Fort Jay, N. Y.	3	8.17	1	3.39	2	6.35
Fort McPherson, Ga.	3	4.12				
Fort Riley, Kans.	3	1.61	2	1.10	2	1.04
Walter Reed General Hospital, Takoma Park, D. C.	3	19.11	3	21.43	1	7.81
Letterman General Hospital, San Francisco, Cal.			11	41.20	9	31.47
General Hospital, Fort Bayard, N. Mex.	1	7.81	8	64.00	7	56.91
Fort Hamilton, N. Y.			5	11.06	2	3.82
Fort Baker, Cal.	2	5.18	4	10.84	5	11.79
Madison Barracks, N. Y.			4	8.06		
Fort Adams, R. I.	1	1.81	3	5.43	1	1.61
Fort Barrancas, Fla.	2	3.71	3	6.45	2	3.48
Fort Du Pont, Del.	1	1.84	3	7.21	3	5.70
Fort Ethan Allen, Vt.	2	2.65	3	3.88	1	1.43
Fort George Wright, Wash.	1	1.89	3	6.40	1	2.42
Fort Lincoln, N. Dak.			3	11.67	3	15.63
Fort Logan, Colo.	2	3.19	3	5.24		
Fort Mackenzie, Wyo.	2	3.68	3	8.77	1	2.08
Fort McIntosh, Tex.	2	8.30	3	9.49		

TABLE No. 21.—*Tuberculosis (all) at Army stations, United States, continental (excluding Alaska), year 1912, compared with 1911 and 1910, enlisted men*—Continued.

	Admissions.					
	1912		1911		1910	
	Number.	Ratio per 1,000 of mean strength.	Number.	Ratio per 1,000 of mean strength.	Number.	Ratio per 1,000 of mean strength.
Fort Oglethorpe, Ga	1	1.25	3	9.84	2	2.99
Fort Totten, N. Y			3	4.72	1	1.38
Fort Myer, Va	2	2.93	2	3.07	4	4.97
Fort Porter, N. Y	2	10.99	2	8.73	3	12.15
Fort Monroe, Va	1	.81	1	.93	5	4.09
Fort Robinson, Nebr	2	3.60	1	2.15	4	8.68
Fort Snelling, Minn			1	2.17	4	3.99
Alcatraz Island, Cal					3	18.63
Boise Barracks, Idaho					3	25.42
Fort Des Moines, Iowa	1	1.45			3	4.95
Fort Thomas, Ky					3	6.40
Washington Barracks, D. C					3	5.58
9 posts not included above had 2 cases each, 1912	18					
13 posts not included above had 2 cases each, 1911			26			
12 posts not included above had 2 cases each, 1910					24	
19 posts not included above had 1 case each, 1912	19					
13 posts not included above had 1 case each, 1911			13			
16 posts not included above had 1 case each, 1910					16	
Field, miscellaneous	8		30		10	
Total	190	3.25	215	3.89	196	3.52

On account of the large number of cases reported at Vancouver Barracks in September, 1912, Col. George E. Bushnell, Medical Corps, was directed to proceed there and to make a thorough investigation. He reported in part as follows:

In compliance with the requirements of this communication I left for Vancouver Barracks by the first available train on September 7, arriving at that post on September 10. Upon inquiry it appeared that the garrison was in a state of mind bordering upon panic. The idea prevailed that a very considerable number of soldiers had been infected with pulmonary tuberculosis and that the disease was the result of a place infection. Such a condition, if it really prevailed, was not only exceedingly serious in its results to the military service but also was unprecedented in the history of medicine, at least as regards the number of cases supposed to be implicated. My first endeavor, therefore, was to examine the cases of supposed tuberculosis, upon which work I entered on the morning of September 11.

The wisdom of the course pursued in examining the cases on hand before beginning the study of the epidemic was apparent, for on completion of my examination the epidemic had vanished. Of the 16 cases examined but 7 presented any evidence of disease. Of these 7 W. had pleurisy; M.'s diagnois was not made; L. had laryngitis; leaving 4 cases with doubtful signs which may or may not mean tuberculosis. Not one case was found with frank undisguised pulmonary tuberculosis.

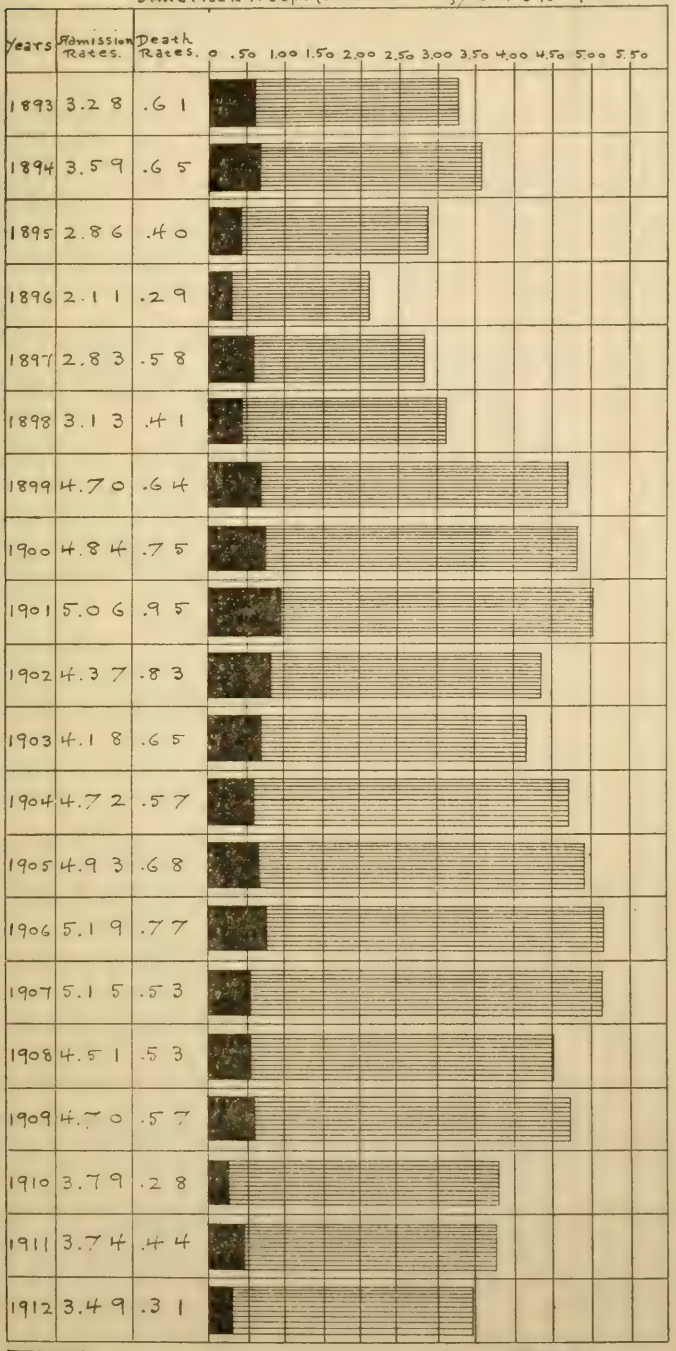
In addition to these 16 cases there were a large number of cases in which physical examination made in a routine way of the command had discovered what were supposed to be suspicious signs. The men, however, had not been admitted to sick report and were simply listed as suspicious for further examination. After witnessing the results of my examination of the foregoing cases the surgeon advised that they be not examined. I agreed with him that it would be a waste of time.

Of the 26 cases diagnosticated as pulmonary tuberculosis at Vancouver Barracks in only a fraction was the sputum found positive for tubercle bacilli. This fact in itself would excite suspicion as to the accuracy of the diagnosis, but that opinion should be held in reserve, for of 10 cases from Vancouver Barracks, in which the

Chart V.

Tuberculosis.
Admission and Death Rates.
Admission and Death Rates for Tuberculosis for the Army
American Troops {Enlisted Men} years 1893-1912.

Years	Admission Rates.	Death Rates.
1893	3.28	.61
1894	3.59	.65
1895	2.86	.40
1896	2.11	.29
1897	2.83	.58
1898	3.13	.41
1899	4.70	.64
1900	4.84	.75
1901	5.06	.95
1902	4.37	.83
1903	4.18	.65
1904	4.72	.57
1905	4.93	.68
1906	5.19	.77
1907	5.15	.53
1908	4.51	.53
1909	4.70	.57
1910	3.79	.28
1911	3.74	.44
1912	3.49	.31



diagnosis of pulmonary tuberculosis was made at Fort Bayard, in 5 the sputum has remained negative, though examined repeatedly (in 1 case forty-four times). It is not uncommon to find cases of undoubted pulmonary tuberculosis with profuse, purulent expectoration, in the sputum of which the tubercle bacilli are found with the greatest difficulty. Such cases the writer regards as complicated by a nontuberculous bronchitis which produces such quantities of pus that the tubercle bacilli are, as it were, lost in its abundance. When this is the explanation the bacilli are usually to be found by the antiformin method. When that method fails, as it has in the above 5 cases, the absence of the bacilli seems inexplicable if active tuberculosis is really present. In another class of tuberculous cases in which the sputum is scanty and mucous, the explanation of the absence of tubercle bacilli is the arrest of the tuberculous process sufficiently to shut off the lesion from the bronchi, so that tubercle bacilli no longer escapes from it. The 5 cases under consideration do not belong to the second class. They have all, at one time at least, had abundant purulent expectoration and sufficient time has not elapsed to arrest their lesions. The continued absence of tubercle bacilli casts doubts, in the opinion of the writer, upon the tuberculous nature of their affection. It should, however, be stated in this connection that it is believed that the sputum of G. was found positive for tubercle bacilli at Vancouver Barracks.

The prevailing teachings are responsible for much of the confusion at Vancouver Barracks. It is commonly thought that tuberculosis is communicable from man to man and from infected surroundings to adults who live in them. Hence the frequent disinfections and the consternation when such measures appear to be unavailing. The writer believes that the communicability of tuberculosis, a fact which can not be denied as a general proposition, is greatly restricted by factors which have until recently not been understood, and desires to state briefly what he considers the latest results of scientific investigations as to the communicability of tuberculosis in a series of propositions. This unusual course is taken for the reason that much of the work which has developed the facts upon which the theory is based is of so recent date that it has not been brought to the attention of the medical profession of this country.

1. Soldiers are probably almost without exception infected with tuberculosis before enlistment; that is, while they have no manifest tuberculous disease, they have come in contact with the tubercle bacillus.

2. Tuberculous infection produces an immunity to reinfection.

3. Localization of tuberculous disease, as in chronic pulmonary tuberculosis, is an evidence of such immunity. The tuberculosis has not spread at once after infection throughout the body because through the acquired immunity its healthy portions have been able to resist temporarily or permanently the establishment of new foci at a distance from the original focus.

4. The processes of immunity are relatively powerless to prevent the spread of tubercles already formed. The disease may gradually extend from the tuberculous foci through the elsewhere immune body until it ultimately overpowers the resistance of the individual and becomes generalized.

5. The manifest tuberculosis of the immune adult (i. e., usually, localized chronic pulmonary tuberculosis) is not acquired from without, but results from the partial breaking down of immunity which permits growth of the subject's own bacilli.

6. If a soldier had never come in contact with tubercle bacilli previous to enlistment a large infection with tubercle bacilli would not cause pulmonary tuberculosis but acute miliary tuberculosis, an acute and rapidly fatal disease.

7. If such an individual should receive a primary dose of tubercle bacilli small enough to produce an immunity in the usual way, the process of development of a chronic pulmonary tuberculosis would be so slow that the place and time of infection would not be determinable.

8. The epidemic prevalence of chronic pulmonary tuberculosis in the Army as the result of infective conditions in barracks or elsewhere is an impossibility.

(*a*) Because 99 out of 100 soldiers are immune to such infection.

(*b*) Because if there were a sufficient number of nonimmune soldiers to make epidemic infection possible the form of tuberculosis would not be chronic pulmonary tuberculosis, but acute disseminated or miliary tuberculosis.

In connection with the opinion of Col. Bushnell quoted above, it is interesting to note that of the 273 cases of tuberculosis occurring in the Army in 1912, 73, or more than one-fourth, were detected during the first year of service.

In 1911 out of 258 cases, 68 were detected the first year of service.

TABLE No. 22.—*Occurrence of tuberculosis (all) among American troops, Army, year 1912, by years of service—Enlisted men.*

	During first year of service.	During second year of service.	During third year of service.	During fourth year of service.	During fifth year of service.	During sixth year of service and over.	Total.
United States, continental (excluding Alaska):							
Mean strength	13,247	9,690	6,698	5,904	5,325	17,510	58,374
Admitted	51	33	9	18	18	61	190
Ratio per 1,000 of mean strenght	3.85	3.41	1.34	3.05	3.38	3.48	3.25
Duty	4	7	1	4	3	8	27
Died	1	1	1	1	2	3	9
Discharged on certificate of disability	27	6	1	2	7	14	57
Otherwise	2	.....	2	2	.....	1	7
Remaining Dec. 31, 1912	17	19	4	9	6	35	90
Philippines:							
Mean strength	2,610	2,805	1,263	852	880	3,947	12,357
Admitted	15	18	.....	2	5	22	62
Ratio per 1,000 of mean strength	5.75	6.42	.....	2.35	5.68	5.57	5.02
Duty	.....	.....	.....	.....	.....	1	1
Died	1	1	.....	2	.....	2	6
Discharged on certificate of disability	4	3	.....	.....	.....	2	9
Otherwise	.....	.....	.....	.....	.....	1	1
Remaining Dec. 31, 1912	10	14	.....	.....	5	16	45
Alaska:							
Mean strength	128	178	83	139	125	544	1,197
Admitted	2	.....	.....	1	.....	2	5
Ratio per 1,000 of mean strength	15.63	.....	.....	7.19	.....	3.68	4.18
Remaining Dec. 31, 1912	2	.....	.....	1	.....	2	5
Hawaii:							
Mean strength	746	1,067	334	183	271	775	3,376
Admitted	3	.....	.....	1	.....	3	7
Ratio per 1,000 of mean strength	4.02	.....	.....	5.46	.....	3.87	2.07
Duty	.....	.....	.....	.....	.....	1	1
Died	.....	.....	.....	.....	.....	1	1
Discharged on certificate of disability	1	.....	.....	.....	.....	1	2
Remaining Dec. 31, 1912	2	.....	.....	1	.....	.....	3
Canal Zone, Panama:							
Mean strength	263	131	62	57	57	203	773
Admitted	1	1	2	.....	.....	2	6
Ratio per 1,000 of mean strength	3.80	7.63	32.26	.....	.....	9.85	7.76
Duty	.....	.....	.....	.....	.....	1	1
Discharged on certificate of disability	.....	.....	1	.....	.....	.....	1
Remaining Dec. 31, 1912	1	1	1	.....	.....	1	4
China (no cases):							
Mean strength	190	225	96	90	132	364	1,097
Transports:							
Mean strength	230	270	97	79	131	286	1,093
Admitted	1	.....	.....	1	1	.....	3
Ratio per 1,000 of mean strength	4.35	.....	.....	12.66	7.63	.....	2.74
Discharged on certificate of disability	.....	.....	.....	1	.....	.....	1
Remaining Dec. 31, 1912	1	.....	.....	.....	1	.....	2
Total Army:							
Mean strength	17,414	14,366	8,633	7,304	6,921	23,629	78,267
Admitted	73	52	11	23	24	90	273
Ratio per 1,000 of mean strength	4.19	3.62	1.27	3.15	3.47	3.81	3.49
Duty	4	7	1	4	3	11	30
Died	2	2	1	3	2	6	16
Discharged on certificate of disability	32	9	2	3	7	17	70
Otherwise	2	.....	2	2	.....	2	8
Remaining Dec. 31, 1912	33	34	5	11	12	54	149

UNDETERMINED FEVERS.

The admission rate for these fevers for the United States was 1.94 per 1,000 as compared with 2.50 for 1911, 2.42 for 1910, 2.15 for 1909, and 3.80 for 1908. The rate was higher in Alaska there being three cases in 1912, and only one in 1911. It was much higher in the Philippine Islands being 15.46 per 1,000 as compared with 6.74 in 1911. The rates for Hawaii, the Canal Zone, and the Transports were lower. The total rate was 4.08 per 1,000 as compared with 3.37

for 1911, and 3.89 for 1910. The different diagnosis included under this heading and the number of admissions are given in the following table:

TABLE No. 23.—*Undetermined fevers, 1912, American troops, by countries—Enlisted men.*

Diseases.	United States (continental), excluding Alaska.	Alaska.	Hawaii	Philippine Islands.	Canal Zone, Panama.	China.	Army transports.	Total.
Febricula	39	3	.....	104	1	2	1	150
Fever, simple continued	12	.....	8	34	.....	.....	.....	54
Fever, type undetermined	55	.....	.....	53	.....	.....	.....	108
Ephemeral fever	7	.....	.....	.....	.....	.....	.....	7
Total	113	3	8	191	1	2	1	319
Ratio per 1,000 of mean strength	1.94	2.51	2.37	15.46	1.29	1.82	0.91	4.08

MENTAL ALIENATION.

It is impracticable to compare the admission rate for this class of disturbances with the rate for diseases formerly classified and published under the term "insanity." The diseases included under the term "mental alienation," used in the present nomenclature which was put into use January 1, 1912, includes several conditions not included under the term insanity, such as defective mental development, constitutional psychopathic state, hypochondriasis, and nostalgia. The case admission rate for this class of diseases was 3.26 per 1,000 and the discharge rate was 2.78.

ALCOHOLISM.

The admission rate for alcoholism in the United States for the year 1912 was 16.67, which is quite a material improvement over the preceding year, when it was 20.31. It is gratifying to observe that this rate has shown a steady diminution since 1907, following an equally steady rise for eight years before 1907. It is interesting to note that the rate for 1912 is the lowest for any year since 1870, except for the year 1898, when the rate was approximately 16 per 1,000. As this was a year of war, when such rates are usually lower, it can hardly be taken as a basis of comparison. These rates do not represent the amount of intemperance existing in the Army, but as they are all calculated from similar data—that is, the number of cases in which medical assistance was invoked to avert danger—they are useful as an index of alcoholic excess. This marked decrease in the admission rate for 1912 is believed to be largely due to the effect produced by the act of Congress stopping the pay of officers and enlisted men when incapacited for duty on account of sickness due to drug addiction, alcoholism, or other misconduct.

SMALLPOX.

Only 6 cases of smallpox occurred during the year. There was no death. In 1911 there were 4 cases without a death.

DIPHTHERIA.

At Fort Sam Houston an epidemic of this disease, which started in December, 1911, continued until January 19, 1913, when the last case occurred. During the epidemic there were 31 cases, including 6 general prisoners and 3 officers. Eleven of these cases, including 2 among general prisoners, occurred in December, 1911. At Fort Benjamin Harrison in November, 1912, there was a small epidemic of 9 cases, including 1 medical officer and 3 children residing on the reservation. During the year 76 cases occurred. There was no death and no discharge resulting.

MEASLES.

During the year 1912, 426 cases of measles occurred in the United States, with 12 deaths and 6 discharges. In 1911 there were 1,101 cases, with 25 deaths.

Two hundred and one cases, with the 12 deaths and the 6 discharges, occurred in 1912 at Columbus Barracks during the extensive epidemic there, mentioned on pages 79 and 80 of the last report of this office. Since this epidemic was stamped out no other extensive one has occurred, though there have been small epidemics reported at a number of posts.

CEREBROSPINAL MENINGITIS.

Ten cases of this disease with 4 deaths occurred in the Army in the United States during 1912. Between January 1 and June 2, 1913, 13 cases, with 4 deaths and 3 discharges, occurred at Jefferson Barracks, Mo. Maj. Howard, the surgeon, reports as follows:

Lumbar puncture was done early in every case, and the diagnosis confirmed bacteriologically. Flexners serum was administered in every case as soon as the diagnosis was made and was repeated at intervals as indicated.

With the exception of the last case, all cases were in recruits of very short service, minimum 9 days, maximum 41 days. The source of the infection can not be determined with accuracy, though it is believed that in every case (the last one excepted) the infection was introduced from endemic centers of the disease within recruiting districts tributary to this depot. The cases appeared at widely separated points, 9 separate squad rooms furnishing the 13 cases. No cases appeared among the 400 odd permanent party men (until the last case June 2), though they were exposed to the same conditions in the post as were recruits. Careful investigation was made in every case admitted, and the subsequent history of all contacts was followed so far as possible, and no well-established secondary case could be determined. The evidence points conclusively to the fact that no focus of the disease existed within the post, except as introduced from without by infected individuals or carriers from time to time. During the winter the lower Ohio and Mississippi Valleys were notorious centers of the disease. While this district furnishes but a small part of the total of recruits sent to this depot, there were 10 cases of the disease out of the total of 13 coming from this district.

From experience at this depot it is believed that this disease is transmitted in general directly from infected individuals or meningococcus "carriers," and that the danger of infection from fomites and other indirect agencies is very slight, if not negligible. The meningococcus undoubtedly remains in the naso-pharynx of apparently healthy individuals for weeks or months without a true infection taking place. Some carriers develop the disease while others do not. It appears reasonable to assume that when in a "carrier" the individual resistance is lowered by any one of the various causes that a true infection is invited and often occurs.

INFLUENCE OF STATION.

The posts having the highest noneffective rate this year are Fort Bliss, Tex.; Fort Sam Houston, Tex.; and Fort Huachuca, Ariz., in the order named, the rates being, respectively, 40.94, 39.03, and 32.81 per 1,000. It will be noticed, by referring to the column for the average number of days lost for each case, that Fort Bliss and Fort Sam Houston have the unenviable reputation of standing first and second, respectively, with rates of 19.44 and 15.30. In other words, each case admitted to hospital at Fort Bliss remained on sick report for an average of 19.44 days.

The posts having the highest admission rate for the year are Jackson Barracks, La.; Fort Washington, Md.; and Fort Clark, Tex., in the order named. The rates were 1,293.88, 1,054.11, and 1,052.37 per 1,000. As is stated repeatedly in this report, however, the noneffective rate is the true measure of the effect of sick report upon military efficiency. The noneffective rate at these three posts having the highest admission rate was much lower than the three posts mentioned with the highest noneffective rates, and also lower than several others not mentioned. The average number of days' treatment for each case at Jackson Barracks was 7.53, at Fort Clark 10.11, and at Fort Washington 7.86.

The five posts having the lowest noneffective rates for this year are all Coast Artillery posts. The first three of these posts are Fort Warren, Mass.; Fort Dade, Fla.; and Fort Williams, Me., with noneffective rates, respectively, 5.79, 6.58, and 6.91. The average number of days' treatment for each case at these posts was, respectively, 8.08, 6.10, and 5.42.

The three posts having the lowest admission rates were Fort Warren, Fort Lawton, and Fort Hamilton, with rates, respectively, of 262.01, 335.23, and 350.26. The noneffective rate for Fort Warren is given in the last paragraph; that for Fort Lawton was 11.88, and the average number of days for each case at that post was 12.97.

Of the recruiting depots, Fort Slocum, N. Y., as last year, had the highest noneffective rate, 51.90, and Fort McDowell, Cal., as last year, the lowest, 29.72. Fort McDowell had the highest average number of days' treatment for each case, 12.72, and Columbus Barracks, Ohio, the lowest, 9.68. Columbus Barracks had the highest admission rate, 1,720.50, and Fort McDowell the lowest, 855.24. The highest death rate occurred at Columbus Barracks, 13.39 per 1,000, and the lowest at Fort McDowell, where no death occurred.

The Western Division had the lowest noneffective rate, this being 16.41 per 1,000, as compared with 16.67 for the Eastern and 23.86 for the Central. The Eastern Division had the lowest admission rate, being 660.72 per 1,000, as compared with 676.64 for the Central and 684.48 for the Western. The Eastern Division also had the lowest death rate, this being 3.44 per 1,000, as compared with 3.70 for the Western Division and 4.27 for the Central. The Western Division had the lowest average number of days' treatment for each case, this being 8.77 days, as compared with 9.23 for the Eastern Division and 12.90 for the Central.

Tables Nos. 24 and 25 show the posts having the highest and lowest ratios of admission and noneffectiveness in the United States as a whole.

INFLUENCE OF RACE.

The white troops had higher rates than the colored for noneffective, admissions, and discharges, being 27.23, 745.97, and 14.77, as compared with 25.15, 575.56, and 8.04 per 1,000. The death rate for colored troops was, however, higher, being 7.23, as compared with 4.44. These comparisons were also true for 1910 and 1911.

For venereal diseases the rate for the white troops was 116.24, and for the colored 104.50; for alcoholism the rate for the white troops was 17.11, and for the colored 6.83; for tuberculosis (all kinds) the rate for white was 3.27 and for the colored 2.81; for bronchitis the rate for white was 38.47 and for the colored 32.96; for diarrhea and enteritis the rate for the white was 23.69, and for the colored 22.91; and for rheumatism, articular (all), the rate for colored was 10.45 and for the white 9.75. The relative prevalence of the other several diseases in the two races are shown in Table No. 71 at the end of the report.

TABLE NO. 24.—*Posts having the highest admission and noneffective rates per 1,000 of mean strength among all those having a total strength of over 200 officers and men, year 1912.*

	Mean strength.	Ratio per 1,000 of mean strength.										Average number of days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective rate.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
										From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.					
		From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
Posts in order of highest admission rates from all causes:																	
Jackson Barracks, La	245	1,293.88	1,016.33	4.24	4.24	.....	.....	4.24	4.24	26.62	25.63	14.55	13.73	9.74	7.53	5.33	5.24
Fort Washington, Md	499	1,054.11	625.25	.....	.....	2.00	.....	2.00	.....	22.65	19.92	13.50	12.01	8.29	7.86	4.94	7.90
Fort Clark, Tex	401	1,052.37	628.43	.....	.....	.....	.....	.....	.....	29.07	25.16	15.39	12.67	10.64	10.11	5.63	8.96
Fort Oglethorpe, Ga	845	1,049.70	508.88	.....	.....	3.55	1.18	3.55	1.18	25.57	19.96	12.36	9.43	9.36	8.92	4.52	8.87
Fort McPherson, Ga	761	938.24	436.27	2.74	1.37	5.26	.....	8.00	1.37	27.91	25.48	10.79	9.83	10.21	10.89	3.95	9.05
Posts in order of highest admission rates, excluding venereal diseases, injuries, etc.:																	
Jackson Barracks, La	245	1,293.88	1,016.33	4.24	4.24	.....	.....	4.24	4.24	26.62	25.63	14.55	13.73	9.74	7.53	5.33	5.24
Fort Clark, Tex	401	1,052.37	628.43	.....	.....	.....	.....	.....	.....	29.07	25.16	15.39	12.67	10.64	10.11	5.63	8.96
Fort Washington, Md	499	1,054.11	625.25	.....	.....	2.00	.....	2.00	.....	22.65	19.92	13.50	12.01	8.29	7.86	4.94	7.90
Fort Douglas, Utah	876	898.40	619.86	.....	.....	6.85	3.42	6.85	3.42	25.33	20.82	18.10	15.67	9.27	10.32	6.63	10.69
Fort Benjamin Harrison, Ind	744	923.39	579.30	1.43	1.43	2.69	.....	4.12	1.43	30.48	27.69	18.59	17.04	11.16	12.08	6.80	11.74
Posts in order of highest noneffective rates from all causes:																	
Fort Bliss, Tex	567	770.72	488.54	1.83	.....	14.11	8.82	15.94	8.82	40.94	38.75	22.66	21.72	14.98	19.44	8.29	16.97
Fort Sam Houston, Tex	1,083	933.52	501.39	3.86	.97	4.62	3.69	8.48	4.66	39.03	31.91	17.65	14.24	14.28	15.30	6.46	12.88
Fort Huachuca, Ariz	349	796.56	504.30	.....	.....	8.60	2.87	8.60	2.87	32.81	28.53	15.70	13.61	12.01	15.08	5.75	11.40
Fort D. A. Russell, Wyo	2,311	828.44	535.00	3.65	3.65	5.19	2.59	8.84	6.24	31.40	30.70	17.79	17.35	11.49	13.87	6.51	12.17
Fort Benjamin Harrison, Ind	744	923.39	579.30	1.43	1.43	2.69	.....	4.12	1.43	30.48	27.69	18.59	17.04	11.16	12.08	6.80	11.74

Posts in order of highest noneffective rates, excluding venereal diseases, injuries, etc.:																	
Fort Bliss, Tex	567	770.72	488.54	1.83	.....	14.11	8.82	15.94	8.82	40.94	38.75	22.66	21.72	14.98	19.44	8.29	16.97
Vancouver Barracks, Wash	1,370	820.44	549.64	2.29	2.29	2.19	.....	4.48	2.29	27.78	23.30	19.38	17.18	10.17	12.39	7.09	12.90
Fort Benjamin Harrison, Ind	744	923.39	579.30	1.43	1.43	2.69	.....	4.12	1.43	30.48	27.69	18.59	17.04	11.16	12.08	6.80	11.74
Fort Douglas, Utah	876	898.40	619.86	.....	.....	6.85	3.42	6.85	3.42	25.33	20.82	18.10	15.67	9.27	10.32	6.63	10.69
Fort D. A. Russell, Wyo	2,314	828.44	535.00	3.65	3.65	5.19	2.59	8.84	6.24	31.40	30.70	17.79	17.35	11.49	13.87	6.51	12.17

TABLE No. 25.—*Posts having the lowest admission and noneffective rates per 1,000 of mean strength, among all those having a total strength of over 200 officers and men, year 1912.*

	Mean strength.	Ratio per 1,000 of mean strength.										Average number of days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective rate.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
										From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.					
		From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
Posts in order of lowest admission rates from all causes:																	
Fort Warren, Mass	229	262.01	148.47	.....	.....	.....	.....	.....	.....	5.79	5.58	3.54	3.35	2.12	8.08	1.30	8.74
Fort Lawton, Wash	352	335.23	178.98	.....	.....	5.68	.....	5.68	.....	11.88	11.06	4.66	4.03	4.35	12.97	1.70	9.52
Fort Hamilton, N. Y	571	350.26	197.90	.....	.....	.....	.....	.....	.....	6.95	6.69	3.73	3.53	2.54	7.26	1.36	6.89
Fort Dade, Fla	223	394.62	228.70	.....	.....	.....	.....	.....	.....	6.58	6.14	3.84	3.81	2.41	6.10	1.40	6.14
Fort Crook, Nebr	521	437.62	318.62	4.02	4.02	1.92	.....	5.94	4.02	16.80	15.59	9.70	9.13	6.15	14.05	3.55	11.14
Posts in order of lowest admission rates, excluding injuries, etc.:																	
Fort Warren, Mass	229	262.01	148.47	.....	.....	.....	.....	.....	.....	5.79	5.58	3.54	3.35	2.12	8.08	1.30	8.74
Fort Lawton, Wash	352	335.23	178.98	.....	.....	5.68	.....	5.68	.....	11.88	11.06	4.66	4.03	4.35	12.97	1.70	9.52
Fort Hamilton, N. Y	571	350.26	197.90	.....	.....	.....	.....	.....	.....	6.95	6.69	3.73	3.53	2.54	7.26	1.36	6.89
Fort Dade, Fla	223	394.62	228.70	.....	.....	.....	.....	.....	.....	6.58	6.14	3.84	3.81	2.41	6.10	1.40	6.14
Fort McIntosh, Tex	255	494.12	235.29	4.15	4.15	.....	.....	4.15	4.15	15.31	14.58	6.24	5.89	5.60	11.34	2.28	9.70
Posts in order of lowest noneffective rates, from all causes:																	
Fort Warren, Mass	229	262.01	148.47	.....	.....	.....	.....	.....	.....	5.79	5.58	3.54	3.35	2.12	8.08	1.30	8.74
Fort Dade, Fla	223	394.62	228.70	.....	.....	.....	.....	.....	.....	6.58	6.14	3.84	3.81	2.41	6.10	1.40	6.14
Fort Williams, Me	598	466.56	269.23	.....	.....	.....	.....	.....	.....	6.91	6.60	3.66	3.44	2.53	5.42	1.34	4.97
Fort Hamilton, N. Y	571	350.26	197.90	.....	.....	.....	.....	.....	.....	6.95	6.69	3.73	3.53	2.54	7.26	1.36	6.89
Fort Crockett, Tex	234	559.83	346.15	.....	.....	4.27	.....	4.27	.....	10.45	10.33	5.76	5.70	3.82	6.83	2.11	6.09

Posts in order of lowest noneffective rates, excluding injuries, etc.:																	
Fort Warren, Mass.	229	262.01	148.47							5.79	5.58	3.54	3.35	2.12	8.08	1.30	8.74
Fort Williams, Me.	598	466.56	269.23							6.91	6.60	3.66	3.44	2.53	5.42	1.34	4.97
Fort Hamilton, N. Y.	571	350.26	197.90							6.95	6.69	3.73	3.53	2.54	7.26	1.36	6.89
Fort Dade, Fla.	223	394.62	228.70							6.58	6.14	3.84	3.81	2.41	6.10	1.40	6.14
Fort Lawton, Wash.	352	335.23	178.98			5.68		5.68		11.88	11.06	4.66	4.03	4.35	12.97	1.70	9.52
RECRUIT DEPOTS.																	
Columbus Barracks, Ohio	1,195	1,720.50	1,197.49	59.78	48.67	13.39	13.39	73.17	62.06	45.50	40.95	35.21	31.72	16.65	9.68	12.89	10.76
Fort Slocum, N. Y.	1,297	1,616.81	1,146.49	102.12	87.20	4.63	1.54	106.75	88.74	51.90	47.97	37.19	34.68	18.99	11.75	13.61	11.86
Fort Logan, Colo.	646	1,490.71	965.94	113.24	82.93	3.10	1.55	116.34	84.48	42.27	33.40	30.56	25.54	15.47	10.38	11.19	11.58
Jefferson Barracks, Mo.	1,224	1,136.44	816.99	70.77	54.12	6.54	4.08	77.28	58.20	36.92	36.32	22.91	22.58	13.51	11.89	8.38	10.26
Fort McDowell, Cal.	677	855.24	571.64	98.93	83.71			98.93	83.71	29.72	25.90	21.95	19.49	10.88	12.72	8.03	14.42

INFLUENCE OF AGE AND LENGTH OF SERVICE.

The youngest soldiers and those serving their first enlistment had as usual, the highest admission and discharge and noneffective rates and the death rate was highest among those 45 years of age or over having 10 years or more of service. The lowest admission and the lowest constantly noneffective rate occurred in soldiers between 3 and 40 years of age.

The following table exhibits the effects of age and length of service upon rates of disease:

TABLE No. 26.—*Influence of disease on enlisted men serving in the United States continental (excluding Alaska), by length of service, age, and arms of service, for the year 1912.*

	Mean strength.	Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.	Ratio per 1,000 of mean strength: Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.
Length of service:									
Under 1 year	13,247	14,037	397	35	505.69	1,059.63	29.97	2.64	38.1
1 to 2 years	9,690	5,816	104	7	226.39	600.21	10.73	.72	23.3
2 to 3 years	6,698	2,935	39	7	101.09	438.19	5.82	1.05	15.0
3 to 4 years	5,904	2,679	63	3	103.29	453.76	10.67	.51	17.5
4 to 5 years	5,325	2,583	48	9	97.54	485.07	9.01	1.69	18.3
5 to 10 years	8,472	3,626	73	23	141.73	428.00	8.62	2.71	16.7
10 years and over	9,038	3,170	64	52	141.59	350.74	7.08	5.75	15.6
Total	58,374	34,846	788	136	1,317.34	596.94	13.19	2.28	22.5
Age:									
19 years and under	2,637	2,827	63	13	88.61	1,072.05	23.89	4.93	33.6
20 to 24 years	23,126	17,575	351	34	635.33	759.97	15.18	1.47	27.4
25 to 29 years	15,854	8,327	193	18	321.66	525.23	12.17	1.14	20.2
30 to 34 years	8,376	3,237	109	21	140.22	386.46	13.01	2.51	16.7
35 to 39 years	4,531	1,521	38	11	65.91	335.69	8.39	2.43	14.5
40 to 44 years	2,324	791	19	21	39.05	340.36	8.18	9.04	16.8
45 to 49 years	1,093	385	11	10	16.28	352.24	10.06	9.15	14.8
50 years and over	433	183	4	8	10.25	422.63	9.24	18.48	23.6
Total	58,374	34,846	788	136	1,317.34	596.94	13.19	2.28	22.5
Arms of service:									
Infantry	16,572	9,706	202	39	404.49	585.70	12.19	2.35	24.4
Cavalry	9,418	4,800	77	16	186.76	509.66	8.18	1.70	19.8
Field Artillery	3,829	2,504	48	5	108.34	654.00	12.53	1.31	28.2
Coast Artillery	16,025	8,338	200	26	298.17	520.31	12.48	1.62	18.6
Ordnance	636	412	5	2	10.64	647.80	7.86	3.14	16.7
Engineers	1,207	630	15	3	32.85	521.95	12.43	2.49	27.2
Signal Corps	764	388	4	1	14.99	507.85	5.24	1.31	19.6
Hospital Corps	2,502	1,297	54	9	58.08	518.38	21.58	3.60	23.2
All others	7,421	6,771	183	35	203.03	912.41	24.66	4.72	27.3
Total	58,374	34,846	788	136	1,317.34	596.94	13.19	2.28	22.5

INFLUENCE OF SEASON.

Excluding venereal diseases, alcoholism, and injuries, the highest admission, noneffective, and death rates were in March. The lowest admission and noneffective rates occurred in November, and the lowest death rate in October. The following table (No. 27) shows the movement of sick by months. A study of these data for previous years shows a wide variation in the months showing the several

highest and lowest rates. It can be stated, however, in general terms that all rates are highest in the first half of the year and the lowest in the second half. March and April give the highest constantly noneffective rates, and October and November the lowest:

TABLE No. 27.—*Influence of season, United States, continental (excluding Alaska) year 1912—Enlisted men.*

Month.	Mean strength.	Ratio per 1,000 of mean strength.								Prevailing diseases (exclusive of venereal diseases, etc.).
		All causes.					Exclusive of venereal diseases, injuries, alcoholism, and vaccinia.			
		Admissions.			Noneffective.					
		Total.	Hospital.	Deaths.	Total.	Hospital.	Admissions.	Deaths.	Noneffective.	
January....	54,703	72.39	65.48	0.24	30.22	28.25	44.44	0.13	16.39	Tonsillitis, 457; acute bronchitis, 198; influenza, 100; constipation, 93.
February..	55,512	70.58	63.72	.39	30.50	28.42	45.29	.21	18.02	Tonsillitis, 527; acute bronchitis,202; mumps, 111; influenza, 106.
March.....	56.176	76.60	68.21	.54	32.09	29.62	52.48	.29	20.76	Tonsillitis, 472; mumps, 267; acute bronchitis, 253; influenza, 107.
April.....	57,667	67.60	60.64	.35	30.14	27.84	44.08	.15	19.34	Tonsillitis, 323; mumps, 309; acute bronchitis, 186; measles, 86.
May.....	58,317	62.88	56.26	.40	28.93	26.75	38.84	.12	17.22	Tonsillitis, 199; acute bronchitis, 185; mumps, 171; diarrhea and enteritis, 126.
June.....	57,018	57.93	49.62	.48	26.92	24.69	32.50	.18	15.16	Tonsollitis, 125; acute bronchitis, 124; diarrhea and enteritis, 109; constipation, 101.
July.....	60,014	56.57	45.27	.28	25.31	22.97	33.08	.16	14.82	Diarrhea and enteritis, 164; tonsillitis, 137; acute bronchitis, 129; malarial fever, 114.
August.....	59,825	56.67	44.60	.50	25.39	23.01	33.78	.19	15.08	Diarrhea and enteritis, 228; malarial fever, 128; tonsillitis, 113; acute bronchitis, 104.
September.	60,524	53.14	44.28	.39	25.25	23.14	30.04	.16	14.86	Diarrhea and enteritis, 152; tonsillitis, 131; malarial fever, 123; acute bronchitis, 121.
October....	60,077	54.95	44.74	.29	24.73	22.56	30.71	.11	14.50	Tonsillitis, 196; acute bronchitis, 134; diarrhea and enteritis, 134; malarial fever, 96.
November.	60,325	53.10	45.64	.28	23.79	22.03	29.66	.15	13.84	Tonsillitis, 218; acute bronchitis, 179; constipation, 78; diarrhea and enteritis, 76.
December..	60,333	59.12	50.20	.42	23.55	21.82	39.05	.22	14.89	Acute bronchitis, 313; influenza, 312; tonsillitis, 249; rhinitis, 93.
Total.	58,374	738.70	370.93	4.55	27.15	25.00	451.69	2.08	16.19	Tonsillitis, 3,147; acute bronchitis, 2,128; diarrhea and enteritis 1,381; constipation, 1,009.

SANITATION, UNITED STATES.

The sanitary conditions throughout the Army for the year wer exceptionally good. Very few sanitary defects of any importanc were reported on the monthly sanitary reports, and when the atter tion of the authorities was called to such defects, as existed by thes reports, they were usually corrected with promptness, except in case where large appropriations of money were required.

BARRACKS AND QUARTERS.

Barracks are reported as overcrowded at Forts Constitution, Terr Warren, and Vancouver Barracks. The cantonment barracks at th Presidio of San Francisco are also reported as overcrowded. Th ventilation in these cantonments and in the barracks at Fort Greb is inadequate. Efforts have been made to have these defects ren edied. The surgeon at Fort Apache states that the buildings ther are old and in need of repair.

The department hospital at Honolulu is too small. Plans hav been drawn, however, and steps taken to enlarge this hospital suf ciently to meet all the needs of the department for a general hospita

The guardhouse at Monterey has been frequently reported by th surgeon as entirely too small for the size of the garrison, and the com manding officer has made every effort to have it enlarged, but so f without success. The bakery at Fort Yellowstone was reported i 1911 as badly located, too small, and in poor condition. This co dition still exists.

SEWAGE DISPOSAL AND DISPOSAL OF WASTE.

A garbage incinerator has been installed at Fort Des Moines, and reported to be working satisfactorily. In December the surgeon Jackson Barracks reported that the sewage-disposal system at th post had been changed and that the post system was connected wit the general system for the city of New Orleans. Heretofore th sewage has been emptied into a cesspool, from which the coars material was removed from time to time by contract. In the la annual report mention was made of a report of a board of officer composed of Lieut. Col. J. R. Kean, Medical Corps, Maj. F. F. Russe Medical Corps, and Capt. E. T. Hartmann, Quartermaster's Corps, o the sewage disposal, at Fort McPherson, Ga.; the disposal pla recommended was completed and ready for use about the last of th year. Since that time it has been working satisfactorily. Th sewage-disposal plant at Fort Sheridan has also been completed an is satisfactory.

WATER SUPPLY.

The water supply at Fort Omaha, which has heretofore bee reported as unsafe, is now reported as satisfactory. A mechanic filter has been completed, and the water is now clear and potabl

Considerable difficulty has been experienced with the water supply at Fort D. A. Russell. The city of Cheyenne is under contract to furnish this post with a satisfactory, potable water. The supply is impounded in reservoirs from an extensive watershed. This watershed is not fully protected, and has in the past been used as pasture land, and has had several ranch houses located on it. As there is no system of purification, the water is at times quite turbid, and on some occasions has been offensive, due to growth of algæ in the reservoirs. Steps are now being taken by the city of Cheyenne to establish a proper filtration system; in the meantime, at the post, artesian water is being supplied for drinking purposes. The water supply at Fort Lincoln is supplied by the city of Bismarck, N. Dak. The water is from the Missouri River; it is passed through a sedimenting well and three reservoirs before distribution. A part of the year the water is clear and palatable, but at other seasons it becomes turbid, with a high bacterial count and with gas-forming organisms, when it is necessary to boil it. At Fort Porter the water is unsafe, and is boiled. At Fort Niagara distilled water is distributed for drinking and cooking, as the general supply is unsafe. The supply for Fort Des Moines, which was formerly considered unsafe, is now rendered potable by the use of the hyperchlorite process.

At several of the Coast Artillery posts, on account of the high chlorine content, the water is damaging to the pipes and to fabrics. This is especially true at Forts Stevens, H. G. Wright, Terry, DuPont, and Morgan.

SMOKE NUISANCE.

Especial efforts have been made by the post authorities at Columbus Barracks during the year to abate the smoke nuisance. A mechanical stoker has been used in the laundry with good success. As this stoker requires a certain steam pressure, it can not be used in the barrack building with the boilers in use at present. The city of Columbus has passed an antismoke ordinance, and the post authorities are quite anxious to cooperate. The subject is still under consideration by the War Department and by the post authorities as to the best methods to be adopted. At Fort Wayne suit was instituted by the Government, at the request of the commanding officer, against the Detroit Edison Illuminating Co., to compel the company to prevent the smoke coming from their furnaces, which is a great detriment to the post. The suit is suspended to allow the company to carry out the remodeling of the plant. They have changed some of their furnaces, put in a better type of mechanical stoker, and lengthened the smokestacks. When these measures are completed and the desired results obtained, the suit will be dismissed. At Fort Sheridan the offending smoke comes from post building. So far as is known, nothing has been done to better the condition there.

SERVICE CAP AND CAMPAIGN HAT.

The obligatory use of the service cap for constant use in posts is still commented upon adversely by surgeons and commanding officers. This office has several times recommended that the commanding officer be authorized to prescribe the campaign hat whenever the climatic conditions, in his opinion, render such necessary.

SHOES.

Mention was made in the last annual report of the work of the board at Fort Leavenworth, of which Maj. E. L. Munson, Medical Corps, was president, for the selection of a proper shoe for the Army. It was stated in that report that as the result of the work of this board, it was believed that a suitable shoe had been obtained. During the past year it has been necessary to issue such shoes as were on hand. The supply is now almost exhausted, and the new shoes are just now beginning to be issued. Attention is again called to the fact that the shoe can not be fairly considered by itself alone, since its actual utility depends upon the construction, supply, and fit. The fitting must be supervised by officers, who must instruct themselves accordingly. During the present year an officer who had been recommended for action by a retiring board, was ordered to one of the general hospitals, on account of a painful foot. Although there had been considerable correspondence about this officer's case, and he had been advised as to the kind of shoes which would probably be suitable for him, yet when he reported at the general hospital it was found that he was wearing shoes which did not fit him and which were entirely unsuitable for any human foot. A most excellent book, embodying the experience of the board at Leavenworth, has been written by Maj. Munson and published. This book should be carefully studied by all officers and noncommissioned officers who are concerned in the fitting of shoes.

SANITARY SURVEY OF SOLDIERS.

In accordance with the recommendation of the surgeon at Fort Totten, a sanitary survey of all enlisted men in that post is made quarterly. The men are divided in various classes, according to their physical fitness. Any man requiring surgical treatment is sent to the hospital. The same is true in regard to dental treatment, if there is a dentist available. The men who are in special need of physical development are given a course in gymnasium and calisthenic work under the supervision of the post surgeon. The general physical improvement in practically all the men as the result of this training is reported to have been quite marked. Another class receive special rigid company care looking toward the correction of faulty habits—eating, drinking, smoking, care of teeth, etc.

MANEUVER CAMPS, 1912.

During the year 1912 there were only three camps established for the joint instruction of the mobile army and the militia. These were at Fort Benjamin Harrison, Ind.; Anniston, Ala.; and the Connecticut maneuver campaign. The Connecticut maneuver campaign was participated in by regular troops of the mobile army and by militia from New York, New Jersey, Massachusetts, Connecticut, Maine, and Vermont. The troops were divided into the Blue Division and the Red Division. Col. L. M. Maus, Medical Corps, was chief surgeon, and Lieut. Col. William Stephenson, Medical Corps, sanitary inspector of the combined forces. Maj. Robert U. Patterson, Medical Corps, was the assistant to the chief surgeon. The medical staff for the Blue Division was Maj. W. H. Wilson, Medical Corps, chief surgeon, and Maj. Albert E. Truby, sanitary inspector; that for the Red Division was Maj. Thomas J. Kirkpatrick, chief surgeon, and Maj. Basil Dutcher, sanitary inspector. There were a number of other medical officers on duty as medical inspectors of the militia and with the regular troops engaged.

The chief surgeon states that letters were sent to the adjutant generals of the States sending troops with a request that a physical examination be made of their respective troops before departure for the maneuvers in order that all those physically disabled might be left at home. He states:

> This request was complied with only in part, inasmuch as a number of men reported with their commands who were entirely unsuited for field service. In order to protect both the Government and the State, boards of medical officers were ordered to convene on the arrival of each organization, for the purpose of culling out the inefficients so that they could be returned at once to their home stations. The personnel of these boards consisted of the Army medical officers assigned as instructor umpire and the senior militia medical officer of each organization. In spite of this precaution, a number of such men remained with their organizations, through the courtesy of indulgent commanding officers, and were found riding about in the various ambulances during the engagements as spectators. Among the disabled were a number of men suffering from gonorrhea. Had the home examinations been made as requested, the Government would have been spared the unnecessary expense of their transportation, pay, and subsistence, and the medical department the burden of their care.

The camp was from August 10 to August 19, 1912. There was a course of instruction for the medical officers of the regular corps and militia, August 10 to August 15.

The camp at Fort Benjamin Harrison was from July 15 to August 1, 1912. There were two periods of instruction for the militia. The first period, July 15 to July 24, was occupied by the Indiana Militia and the second period, July 24 to August 1, by the Ohio. Maj. D. F. Duval, Medical Corps, was the chief surgeon, and Maj. John A. Murtagh, Medical Corps, was the sanitary inspector. In reference to the instruction of the militia medical officers, Maj. Duval says:

> For the Indiana medical officers the instruction consisted of conferences on camp sanitation, which included demonstrations on the construction of company kitchen incinerators and latrines and the medico-military problems. The subject of camp

sanitation, however, did not elicit the interest shown in medico-military problems. This was due to the fact that in all camps heretofore camp sanitation had been dwelt upon so strongly that the medical officers thought they at least had a fair knowledge of sanitary matters, whereas medico-military problems were a new feature, and they felt they knew little about them. This being the case, the program for the medical officers, Ohio National Guard, was confined exclusively to tactical rides and problems, of which they had five. This instruction I believe was a success. The noncommissioned officers were given instruction in medical department papers and fieldwork, and the Hospital Corps was instructed in drilling.

Maj. Paul C. Hutton, Medical Corps, was the chief surgeon at the camp at Anniston, Ala., and Maj. Eugene R. Whitmore, Medical Corps, the sanitary inspector. This camp was from July 5 to August 4, 1912. There was a regular course of instruction for the militia medial officers and Hospital Corps men. The health of the troops at all these camps was excellent.

SANITATION, SECOND DIVISION.

CAMPS AT TEXAS CITY AND GALVESTON.

These camps have been occupied since February 27, 1913. The health of the troops has been at all times excellent. It is interesting to note that not a single case of typhoid fever has developed in either of these camps, or in fact in any of the camps along the Mexican border in 1913. Lieut. Col. W. B. Bannister, Medical Corps, has been chief surgeon, with Maj. R. B. Miller as sanitary inspector at the camp at Texas City, and Maj. F. M. Hartsock, sanitary inspector at the Galveston camp.

The following extracts are from the report of the chief surgeon, July 1, 1913:

TEXAS CITY CAMP.

The original camp site for the Fourth and Sixth Brigades were selected by line officers prior to the arrival of troops, and when headquarters arrived February 27 pipe lines were in place, but the camp site was swampy and with considerable standing water, so that the tents could not be arranged in regular order, and the ground was so level and low and at such distance from the bay front as to present great difficulties in drainage. The troops were pouring in, and it was necessary to locate them temporarily on the site selected till further observation of the terrain permitted the selection of a more sanitary site. By March 3 the division was complete. It was this original camp site that brought about the complaints and criticism with regard to the Texas City encampment, but the commanding general of the Second Division had no voice in the original selection.

A new camp site on the bay front was selected and prepared in advance of occupation by ditching, under supervision of the engineers. Gravel walks were made and tent sites tamped and graveled. On March 13 and 14 the Sixth Brigade occupied the new camp site and the Fourth Brigade on March 22. The new site could be easily drained into the bay, and has proved an excellent selection, as it becomes dry very soon after the heaviest rains we have so far encountered. The soil of the original camp site was composed of clay almost impervious to water for about three feet and then a layer of sand, and this conformation caused difficulties that will be discussed under a different heading.

Water is piped to the camp and is furnished by two artesian wells.

All men requiring it were vaccinated against smallpox. The typhoid prophylactic was administered to all residents of the camp 45 years of age or under, either soldiers requiring it or civilian employees and servants. The sale of articles of food in camp, except such as could be purchased from commissary and authorized exchanges, was prohibited.

The sanitary condition of the grounds was placed under the jurisdiction of each regiment which maintained regimental sanitary squads, under orders of the regimental surgeon.

Sanitary conditions of the grounds not under regimental jurisdiction was maintained by a sanitary squad, composed of four civilians hired by the quartermaster's department, and under orders of the sanitary inspector of the division, who was also charged with the supervision of the sanitary condition of the entire camp. The attention of the regimental surgeon was called to any sanitary defects discovered at these inspections; and if they were not promptly corrected the sanitary inspector left notes with the regimental adjutant concerned. If this failed to promptly effect the purpose, report was made to division headquarters. The latter reference was necessary in but rare instances, thus avoiding a considerable volume of correspondence. All officers and enlisted men were required to sleep under mosquito nets, and the few cases of malarial fever imported to camp were treated in a specially screened ward in the field hospital.

Flies are destroyed by fly traps, swatting squads, and the use of condensed milk and formalin, as follows: To each cup of 1 part of water and 3 parts of condensed milk is added 1 to 2 teaspoonfuls of formalin. This is placed in saucers and is very effective. The fly traps are of various sizes, either round or rectangular, and consist, essentially, of a light wooden frame supporting wire netting, inclosing a space, except at the bottom of the trap, in which is a round hole about 3 inches in diameter. Around the margin of the hole is attached a truncated cone of wire netting,

the top of the cone extending up into the inclosed space. These traps are provided with supports to hold them about 2 inches above the support on which they rest, and under the central hole at the bottom is placed a saucer containing the bait. The bait consists of sweetened water, meat, or, the most effective of all, chicken entrails. The traps are set outside the screened kitchens, and it is surprising to see the number of flies that are caught. Each company uses from four to eight traps.

The method employed for the disposal of excreta consisted of pits from 5 to 7 feet deep, according to the depth at which the ground water was reached. These pits were covered by boxes provided with 10 holes, with tops automatically closing to make them fly proof. The boxes were tipped back each day and the pits burnt out, with 14 pounds of straw and 1 gallon of crude petroleum per pit, each day. The urinals covered 2 of the 10 holes, and the projection in the bottom slipped through a hole bored in the top of the latrine box, allowing 8 holes for use; but this was found amply sufficient for each company. This method of using the urinals was made necessary by the fact that the fences inclosing each latrine were built before the urinals were received, and there was not sufficient room between the fences and the latrine boxes to use the urinals the way they were constructed to be used. The method has proven very satisfactory. By coating these urinals with crude petroleum no fly will light in them. It was found that in tipping back the latrine box to burn out the pits the weight of the box caved in the edge of the pit, so that the contents of the pit was accessible to flies. This was avoided by a footboard extending entirely around the latrine box, with a strip of wood marking out on the foot a space sufficient to just receive the latrine box. This footboard also prevents men sitting on the latrine box from caving in the front edge of the pit.

The picket lines are cleaned each day and the manure hauled to a common dumping ground, where it is distributed in windrows and burnt over. These windrows are 8 or 10 feet apart, so as to allow space, when the manure is wet by rain, to spread the heaps out to dry. The picket lines are burnt over with hay and crude petroleum once each week.

The waste of each company and separate unit is disposed of in kitchen incinerators, and that portion of the waste that is indestructible by fire, such as tin cans, etc., after sterilization in fire, are buried.

As this encampment is immediately contiguous to Texas City and the enlisted men frequent cafés, restaurants, saloons, etc., and officers' families reside in the hotels, the sanitary conditions of these establishments and of the town was of serious importance to this command. After consultation with the health officer and mayor and with their concurrence, a sanitary inspector was detailed on this inspection duty in Texas City. The object of this inspection was to see that the garbage from restaurants was properly disposed of, etc., that food exposed for sale was protected from flies, that ice boxes were provided for meats, etc., and that open privies were made fly proof, and that premises were kept clean. In the case of cafés, restaurants, and saloons, if the recommendations were not carried out, the provost guard of the city was notified and a sentry was stationed in front of the offending establishment and no soldiers permitted to enter until the sanitary inspector requested the removal of the sentry. In case of a dispute between the proprietor and the sanitary inspector the division surgeon personally inspected the premises and decided whether the sentry should be removed or not. This was necessary in only two instances. As the places referred to are entirely dependent on soldier patronage, the method was very effective. In case of hotels, the kitchens, ice boxes, and premises were inspected with the consent of the proprietor and defects reported to him by the sanitary inspector. The control of the sanitation of a town by the military and the concurrence of its inhabitants, even where saloons, restaurants, etc., were temporarily closed, with scarcely any friction was a matter of considerable surprise to the division surgeon who inaugurated the method somewhat as an experiment. This, I believe, will be successful only where the business interest concerned is dependent on soldier patronage, and where the inhabitants understand that in case of an undue amount of sickness the command would be moved elsewhere.

GALVESTON CAMP.

The Fourth, Seventh, and Nineteenth Infantry were camped on the parade grounds of Fort Crockett. The Twenty-eighth Infantry was encamped on low-lying sandy soil on the sea front.

The water supply comes from artesian wells on the mainland, 17 miles inland at Alta Loma, and is piped to camp. The quality of the water is excellent.

In the camp of the Fifth Brigade, three regiments, the Fourth, Seventh, and Nineteenth Infantry, had toilets provided with four galvanized tin troughs opening into a common center, flushing into sewer mains by means of water taps at each end. Board seats were provided, covered, and sheltered by wood fences. Urine troughs made of tin were provided in every toilet and flushed with running water. The water system

was kept so that a continuous small stream was provided at all times, large 2-inch faucets were utilized in addition to flushing thoroughly twice daily the entire system. This latter flushing was handled by a sanitary squad from each regiment under the direction of a sanitary sergeant and the supervision of the sanitary inspector, Fifth Brigade. Disposal of excreta in the Twenty-eighth Infantry camp was by means of earth latrines covered by latrine boxes, with the usual daily incineration, for the first six weeks. Owing to the frequent caving in of the latrines, eight old pattern McCall incinerators were installed for this regiment and the latrine system discontinued. In other respects the sanitary means employed in this camp were the same as employed in the camp at Texas City.

SANITARY INSPECTION OF THE CAMPS AT TEXAS CITY AND GALVESTON, TEX., BY LIEUT. COL. J. R. KEAN.

Soon after the camp was established at Texas City repeated reports were received in the War Department from interested civilians to the effect that the health of the troops could not be maintained at that camp site. The Secretary of War directed Lieut. Col. J. R. Kean, Medical Corps, to proceed there and make a special sanitary inspection. He arrived on March 17, and spent several days in inspecting the camps. He reported that—

To sum up the advantages of the two points, Galveston has in its favor: (1) It will be cooler; (2) more free from mosquitoes; (3) much greater facilities for the amusement of officers and men; (4) a sewered camp site for most of the troops; (5) less mud in prolonged wet weather.

On the other hand, Texas City has in its favor: (1) The fact that the troops are now established there and have expended much labor to make their camp site comfortable and sanitary; (2) its sanitary arrangements are all completed and are satisfactory from a hygienic point of view.

It is the opinion of the undersigned that the health of the troops at Texas City can be maintained at a satisfactory standard without moving the camp. A transfer to Galveston will, however, much promote the comfort, amusement, and contentment of the command.

He found that at the camp at Galveston—

There seems to have been much delay in providing latrines for the Twenty-eighth Infantry, and for the first three weeks they used shallow trenches without box seats, a primitive method which would have made trouble had the weather been warmer, as the eggs of flies deposited in fecal matter hatch out and develop in spite of burying, and the fully developed fly still retains in its intestines infectious material on which the larvæ may have fed.

The finishing touches were being put on the Havard sink boxes by the company artificers the day of my inspection, the 17th, and urine troughs were not yet installed.

He recommended that—

Latrines and kitchen incinerators are necessary as soon as troops arrive at a camp, in order to avoid improvised methods of disposal which pollute the camp site, and therefore steps should be taken to provide them in advance of the arrival of troops.

For the methodical and sanitary preparation of camp sites, it is recommended that in every case where a command larger than a regiment is placed in camp that an engineer officer, a medical officer, and a quartermaster be ordered in advance to prepare the camp site. The medical officer should if possible be either the sanitary inspector of the department or of the division to which the troops belong.

VETERANS' CAMP AT GETTYSBURG, PA., 1913.

Lieut. Col. Alfred E. Bradley, Medical Corps, chief surgeon of this camp, reported in part as follows:

The veterans' encampment at Gettysburg, Pa., July 1 to 4, 1913, was first designed to accommodate 40,000 veterans.

I was designated chief surgeon of the camp on June 6, 1913, and proceeded on June 7 to Gettysburg to inspect the camp to determine just what sanitary measures were indicated, and what arrangements should be made to care for the sick. It was thought that the advanced age of the men the camp was to shelter, the season of the year, and the long journey many would take to reach the camp would result in unusual morbidity, and probably a large mortality.

It was my belief that the hospital provisions which had already been made, namely, one field hospital and three regimental hospitals, would not be adequate, and recommendations were made that another field hospital and more sanitary personnel be provided, and supplies and equipment be furnished so that these hospitals could be expanded to accommodate at least 1,000 sick. I was informed at this time by Maj. Normoyle, Quartermaster Corps, in charge, that 55,000 veterans were expected, and that the civilian employees of the camp would total more than 2 000. My estimate was therefore based on less than 2 per cent sick, which seemed to me to express the minimum requirements. My recommendations were approved and Field Hospital No. 1 was ordered from Fort D. A. Russell, Wyo., additional personnel was ordered (G. O. 26, H. E. D., June 14, 1913), supplies were provided, and to meet the emergency a sufficient number of regular medical officers not being available, 23 Medical Reserve Corps officers were ordered into active service for duty from June 28 to July 10, 1913.

During the encampment 741 ambulance calls were responded to and 1,100 patients were transported.

The personnel, commissioned and enlisted, provided was found to be not at all in excess of that needed. For a period of 48 hours the demands were such that the day was 24 hours long for all. But little time was available for rest or sleep. A less number of officers and men would have been unable to meet the demands made upon the Medical Department during the busiest days.

In assigning and distributing the personnel efforts were made to make provision for prompt first aid. To this end 11 aid stations were established in the camp proper, which, with the 5 hospitals, provided 16 places where first aid could be promptly secured.

Under command of Maj. R. U. Patterson, Medical Corps, the American Red Cross Society, acting as an auxiliary to the Medical Department, operated 14 first-aid and rest stations on the battlefield park roads, over which great crowds passed during the days of the encampment. Red Cross nurses were also assigned to duty with the field hospitals, 13 to each hospital, and did excellent work. Nine persons died, 8 being Federal veterans and 1 a Confederate veteran.

The department of health, State of Pennsylvania, made ample provisions in Gettysburg for the care of the great crowds which poured into that small town. An emergency field hospital was established which cared for many hundreds of patients. First-aid and comfort stations were established in various parts of the town and at the great assembly tent outside the camp proper.

The water was obtained from artesian wells put down for the purpose on the camp site. It was pumped into storage tanks and distributed by gravity. It was of excellent quality and ample in quantity for all purposes. Bubbling drinking fountains supplied by a coil of pipe passing through packed ice made ice water available for drinking purposes throughout the camp, which was a source of much comfort to all during the intensely hot days.

The weather during the early days of the encampment was intensely hot, the thermometer registering on July 2, in one of the hospital tents, 103½° F.

There were many prostrations from heat and many cases of exhaustion. Seven hundred and forty-four cases (all kinds) were admitted to hospitals, and a total of 9,986 received professional aid or treatment during the encampment. This does not include the many thousands who availed themselves of Medical Department provisions for shelter, rest, and water.

It is said that on July 2, 57,400 were subsisted at the camp. Estimates vary as to the actual number of veterans at the camp, but it seems to be the concensus of opinion that there were not less than 55,000. The time of the encampment extended over a period of eight days, June 29 to July 6, and it is believed that the daily average for those days will approximate 40,000. This indicates that the annual death rate for the period was at the rate of about 10 per 1,000 less than the normal death rate of any community of like size.

It is difficult to get accurate data as to numbers, but it is believed that the above estimates are conservative. It must be admitted that the mortality, the death rate, under the conditions is most remarkably low. The age factor alone would indicate an expected rate far above a normal rate.

The youngest veteran known to have been at the camp was 61 years of age. The oldest alleged that he was 112 years. The average age was probably well over 70 years.

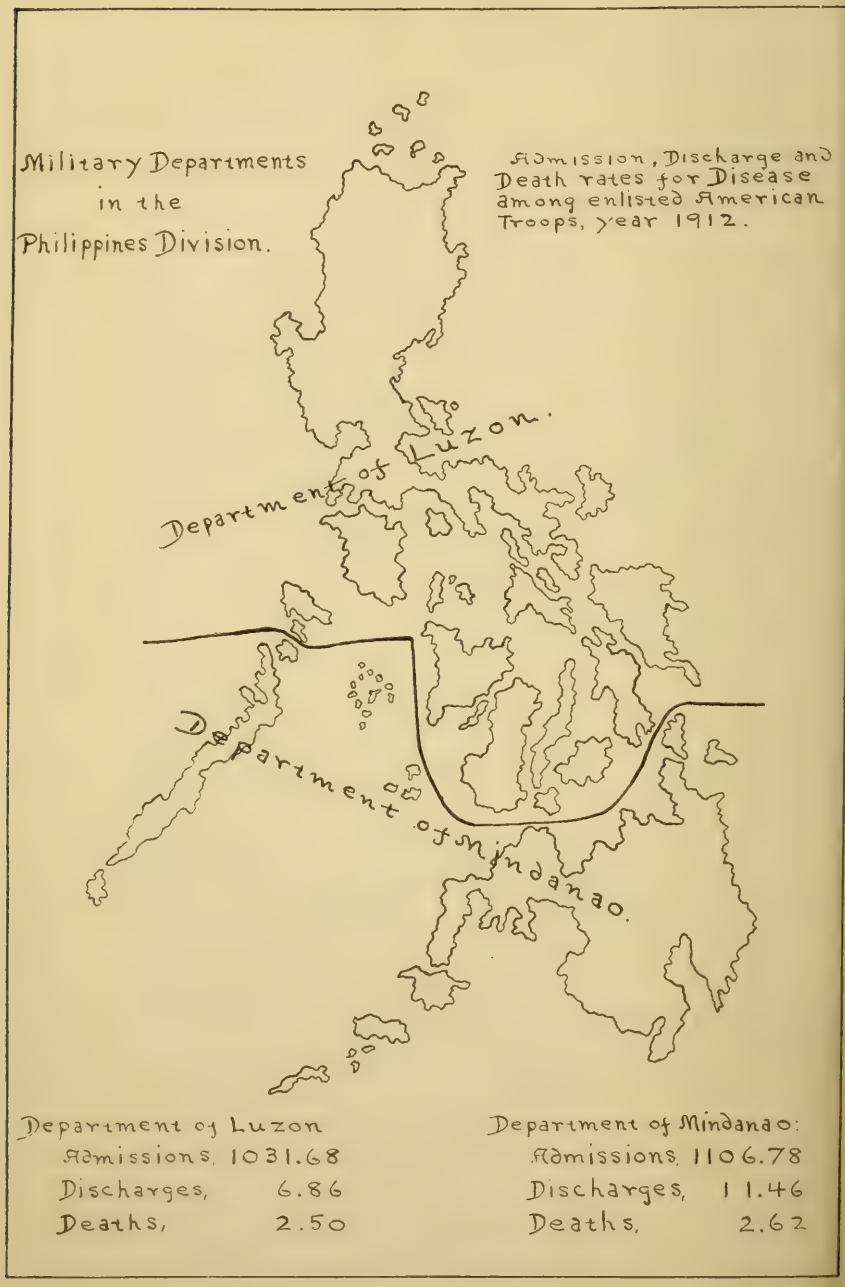
The camp was unique; surely never before in the world's history have so great a number of men so advanced in years been assembled under field conditions.

The sanitary measures used in this camp were similar to those used in military camps in the last few years, and here, as elsewhere, they proved very satisfactory.

Military Divisions, United States, continental (excluding Alaska) showing the relative Admission, Discharge, and Death rates for Disease {Enlisted men}, Year, 1912.

Dept. of the Columbia.
Western Division
Dept. of California.
Dept. of the Missouri
Central Division
Dept. of Texas
Dept. of the Lakes.
Eastern Division
Dept. of the East.
Dept. of the Gulf.
Western Division {Admissions. 533.94 Discharges. .34 Deaths. 1.18
Eastern Division {Admissions. 524.21 Discharges 1.03 Deaths. 1.33
Central Division {Admissions. 534.12 Discharges. 1.87 Deaths. 2.03

Note: Above figures do not include General Hospitals, Recruit Depots, Independent Stations.


Military Departments
in the
Philippines Division.
Admission, Discharge and
Death rates for Disease
among enlisted American
Troops, year 1912.
Department of Luzon.
Department of Mindanao.
Department of Luzon
Admissions, 1031.68
Discharges, 6.86
Deaths, 2.50
Department of Mindanao:
Admissions, 1106.78
Discharges, 11.46
Deaths, 2.62

PHILIPPINE ISLANDS.

AMERICAN TROOPS.

The improvement in the health of the American troops stationed in the Philippines noted in the annual reports of this office for several years past was not maintained in the year 1912. As shown in Table No. 3 the constantly noneffective rates for all causes and for diseases were both higher in 1912 than in 1911. The same is also true in regard to admission rates, both the total admission rate and the admission rate for diseases being higher than for 1911. These admission rates were also higher than they were in 1910 and in 1909.

The mean strength of the American troops stationed in the Philippine Islands during the year was 12,357 (S. G. O.). Of this number, 11,006 were white troops and 1,351 colored. In addition there were the Philippine Scouts with a mean strength of 5,407 (S. G. O.), for whom the medical statistics will be given separately on page 112.

CONSTANTLY NONEFFECTIVE RATES.

The total constantly noneffective rate for the year was 44.74; that for the white troops being 44.32, and for the colored 48.10. As has been stated elsewhere the cause for the excessively high noneffective rate for the colored troops was due to the unusually high noneffective rate for venereal diseases for these troops in the Philippines, the rate for this cause being 21.70. The total noneffective rate in 1911 was 43.15 and in 1910 was 45.45. As there were no colored troops stationed in these islands during 1910 and 1911, no comparison can be made with the figures for colored troops for 1912.

The total noneffective rate for disease in 1912 was 39.85 per 1,000, as compared with the corresponding rate of 37.83 for 1911, and 40.34 for 1910.

The following tabulation shows the noneffective rate for some of the principal diseases:

Higher in 1912 than in 1911.

Disease.	1911, total.	1912		
		Total.	White.	Colored.
Malarial fevers	1.78	3.51	3.80	1.14
Dysentery	.90	1.12	1.21	.39
Tuberculosis, all	.29	.53	.47	1.05
Diarrhea and enteritis	.92	1.05	1.07	.89

Lower in 1912 than in 1911.

Disease.	1911, total.	1912		
		Total.	White.	Colored.
Typhoid fever	0.20	0.09	0.10	.....
Venereal diseases	16.63	16.55	15.92	21.70
Dengue	1.99	1.90	1.69	3.67
Alcoholism	.43	.35	.36	.26
Rheumatism	.62	.44	.34	.30

It will thus be seen from this tabulation that the principal cause of the increase in the noneffective rate for disease was the rise in the rate for the malarial fevers, the rate increasing from 1.78 in 1911 to 3.51 in 1912. It is interesting to observe that notwithstanding the unusually high noneffective rate for venereal diseases for the colored troops, that due to the decrease in this rate for the white troops, it being 15.92 in 1912 as compared with 16.63 in 1911, the total rate for these diseases in the Philippine Islands showed a slight decrease. The constantly noneffective rate for injuries was slightly lower in 1912 than in 1911, or 1910, it being 4.89 per 1,000 as compared with 5.32 in 1911, and 5.12 in 1910.

ADMISSION RATES.

As stated on page 16 in the tabulation for 1912 the readmissions for what is obviously the same attack of the same disease have been omitted. During the year there were 15,409 case admissions for all causes, white and colored troops, and with a mean strength of 12,357, making a case admission rate of 1,246.99, as compared with the corresponding rate of 1,132 for 1911, 1,144 for 1910, and 1,243 for 1909. The case admission rate for disease was 1,075.34, as compared with 947 for 1911, 956 for 1910, and 1,062 for 1909. The case admission rates for white troops for diseases, injuries, and all causes were 1,025.08, 164.36, and 1,189.44 per 1,000, as compared with the corresponding rates for the colored troops, which were, respectively, 1,484.83, 230.94, and 1,715.77 per 1,000.

The cause for the increased admission rate in 1912 was the same as that for the increased noneffective rate, the great increase in the rate for malarial fevers, this being 171 in 1912, as compared with 75.56 per 1,000 in 1911, or an increase of 95.44 per 1,000.

The case admission rate for injuries was 171.64, as compared with 185 for 1911, 188 for 1910, and 185 for 1909. It is thus apparent that the admission rate for injuries was lower in 1912 than it has been for several years previous.

DISCHARGES ON CERTIFICATES OF DISABILITY.

The American soldiers are very rarely discharged in the Philippines, the cases being invalided home and discharged in the United States, but these are, however, credited to the Philippines. These are the cases shown in the Table No. 28.

The discharge rate for 1912 was 9.63, as compared with the corresponding rate of 11.64 per 1,000 for 1911. The rate for disease was 8.34 per 1,000 and that for injury 1.29, as compared with the corresponding rates of 10.52 and 1.12 in 1911. The total rate for the white troops was 10.18 and that for colored troops was 5.18.

The diseases causing the highest number of discharges were:

	Absolute numbers.	Rate per 1,000.
Mental alienation	27	2.19
Tuberculosis, all	18	1.46
Venereal diseases	14	1.13

The corresponding rates for mental alienation in the United States was 2.78 per 1,000. As stated in the last report this is of interest in view of the general idea which prevails in this country that so many Americans become insane in the Tropics.

TABLE NO. 28.—*Discharges for disability, American troops in the Philippine Islands, year 1912.*

Cause of discharge.	Number discharged.	Percentage of discharges for disability for disease.	Discharged for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty.
DISEASES.							
General diseases	42	40.78	21	8	13	.....	.....
Tuberculosis (of the lungs, 17; of other organs, 1)	18	17.48	17	1	.....	.....	.....
Venereal diseases	14	13.59	1	2	11	.....	.....
Syphilis (tertiary, 3; secondary, 1; hereditary, 1)	5	4.85	.....	1	4	.....	.....
Gonorrhea and results (arthritis, 6; chronic urethritis, 2; ophthalmia, 1)	9	8.74	1	1	7	.....	.....
Alcoholism, chronic	3	2.91	.....	2	1	.....	.....
Drug habit (cocaine and morphine, 1; morphine, 1)	2	1.94	.....	1	1	.....	.....
Chronic amoebic dysentery	1	.97	1	.....	.....	.....	.....
Chronic articular rheumatism	1	.97	1	.....	.....	.....	.....
Diabetes mellitus	1	.97	1	.....	.....	.....	.....
Diabetes insipidus	1	.97	.....	1	.....	.....	.....
Exophthalmic goitre	1	.97	.....	1	.....	.....	.....
Diseases of the nervous system and organs of special sense	40	38.83	9	29	2	.....	.....
Mental alienation	27	26.21	5	21	1	.....	.....
Chronic otitis media	4	3.88	1	3	.....	.....	.....
Epilepsy	3	2.91	.....	3	.....	.....	.....
Hysteria	2	1.94	.....	2	.....	.....	.....
Locomotor ataxia	1	.97	.....	.....	1	.....	.....
Apoplexy	1	.97	1	.....	.....	.....	.....
Paraplegia ataxia	1	.97	1	.....	.....	.....	.....
Chronic neurasthenia	1	.97	1	.....	.....	.....	.....
Diseases of the bones and organs of locomotion	8	7.77	3	5	.....	.....	.....
Flat feet	5	4.85	.....	5	.....	.....	.....
Chronic synovitis	2	1.94	2	.....	.....	.....	.....
Chronic arthritis	1	.97	1	.....	.....	.....	.....
Diseases of the respiratory system	5	4.85	3	2	.....	.....	.....
Asthma, bronchial	4	3.88	3	1	.....	.....	.....
Goitre, simple	1	.97	.....	1	.....	.....	.....
Diseases of the genito-urinary system	5	4.85	1	4	.....	.....	.....
Enuresis, chronic	2	1.94	.....	2	.....	.....	.....
Chronic parenchymatous nephritis	1	.97	1	.....	.....	.....	.....
Nephrolithiases	1	.97	.....	1	.....	.....	.....
Cystitis, chronic	1	.97	.....	1	.....	.....	.....
Diseases of the circulatory system	2	1.94	2	.....	.....	.....	.....
Valvular heart disease	1	.97	1	.....	.....	.....	.....
Phlebitis, chronic	1	.97	1	.....	.....	.....	.....
Diseases of the digestive system	1	.97	1	.....	.....	.....	.....
Gastro enteritis, chronic	1	.97	1	.....	.....	.....	.....
Total	103	100.00	40	48	15	.....	.....
EXTERNAL CAUSES.							
Fractures	5	31.25	5	.....	.....	.....	.....
Incised wounds	2	12.50	2	.....	.....	.....	.....
Sprains	2	12.50	2	.....	.....	.....	.....
Effects of injuries, received prior to enlistment	2	12.50	.....	2	.....	.....	.....
Gunshot wound	1	6.25	1	.....	.....	.....	.....
Crushing	1	6.25	1	.....	.....	.....	.....
Dislocation, chronic	1	6.25	1	.....	.....	.....	.....
Concussion of brain	1	6.25	1	.....	.....	.....	.....
Lacerated wound	1	6.25	.....	.....	1	.....	.....
Total	16	13.45	13	2	1	.....	.....
Total for disease	103	86.55	40	48	15	.....	.....
Total for external causes	16	13.45	13	2	1	.....	.....
Grand total	119	100.00	53	50	16	.....	.....

DEATHS.

Deaths occurring in the United States in persons invalided home from the Philippine Islands are credited to the Philippines. There were 69 deaths in 1912, 37 from disease and 32 from external causes, the total rate being 5.26 per 1,000, that for disease 2.82, and for injuries 2.44. These figures are taken from Table No. 29 and are for officers and enlisted men. The figures are slightly different from those given in Table No. 72 in the back of the report, which are for enlisted men only and show only 67 deaths. The corresponding rates for 1911, officers and enlisted men, were, total 5.30 per 1,000, diseases 1.93, and injuries 3.37 per 1,000. It is thus apparent that the rate for disease is considerably higher in 1912 and that for injuries it is lower, while the total rate is slightly lower. There were 13 deaths from drowning in 1912 and 8 in 1911; 3 from suicide in 1912 and 9 in 1911; 4 from homicides in 1912, and 6 in 1911. No officer or soldier, American troops, was killed in action in 1912, while 4 enlisted men and 1 officer were killed in action in 1911.

Tuberculosis caused 7 deaths in 1912 and 1 in 1911; malaria 4 deaths in 1912 and 1 in 1911; syphilis 3 in 1912 and 1 in 1911; organic disease of the heart 1 in 1912 and 5 in 1911.

TABLE NO. 29.—*Causes of death, American troops, Philippine Islands, year 1912—Officers and enlisted men.*

Cause of death.	Number of deaths.	Ratio per 1,000 of—	
		Mean strength.	Deaths from disease.
DISEASES.			
Tuberculosis (lungs, 6; other organs, 1)	7	0.53	189.19
Malarial fever estivo-autumnal	4	.30	108.11
Syphilis (tertiary, 2; secondary, 1)	3	.23	81.08
Alcoholism (acute, 1; delirium tremens, 2)	3	.23	81.08
Abscess of the liver	3	.23	81.08
Appendicitis	3	.23	81.08
Nephritis, chronic parenchymatous	2	.15	54.05
Dysentery, chronic entamoebic	1	.08	27.03
Purulent infection	1	.08	27.03
Cancer	1	.08	27.03
Rheumatism, acute articular	1	.08	27.03
Spontaneous rupture of vein (patient was a hemophilia)	1	.08	27.03
Cerebro-spinal meningitis, acute	1	.08	27.03
Cardiac dilatation	1	.08	27.03
Valvular heart disease	1	.08	27.03
Angina pectoris	1	.08	27.03
Aneurism	1	.08	27.03
Gastritis, chronic	1	.08	27.03
Cholecystitis	1	.08	27.03
Total	37	2.82	1,000.00
EXTERNAL CAUSES.			
Drowning (all accidental)	13	.99	406.25
Gunshot wounds (shot by sentry, 1; homicidal, 1; suicidal, 4; accidental, 3)	9	.69	281.25
Incised wounds (all homicidal)	3	.23	93.75
Fractures (fall from window, 1; from cliff, 1; from moving car, 1)	3	.23	93.75
Crushing (run over by trolley car, 1; struck by pieces of broken machinery following gasoline explosion, 1)	2	.15	62.50
Punctured wound (homicide)	1	.08	31.25
Concussion (struck by locomotive)	1	.08	31.25
Total	32	2.44	1,000.00
Total for disease	37	2.82	536.23
Total for external causes	32	2.44	463.77
Grand total	69	5.26	1,000.00

PREVALENCE OF SPECIAL DISEASES, AMERICAN TROOPS (ENLISTED MEN).

TYPHOID FEVER.

The admission rate per 1,000 was 0.40, as compared with 0.88 in 1911 and 2.53 for 1910. This rate was higher than that for the American Army as a whole, which was 0.27. In absolute numbers there were 5 cases among the enlisted men, and these occurred at Camp Keithley in men infected while in the field, in that vicinity. None of them had been immunized. There was no death. Especial mention is made of this subject under the discussion for the United States.

TABLE No. 30.—*Typhoid fever, Philippine Islands, year 1912, officers and enlisted men, American and native troops.*

Posts.	Mean strength.	Admissions.							
		Americans (mean strength, 13,115).				Philippine scouts (mean strength, 5,407).		Total.	
		Officers.		Enlisted men.					
		Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Camp Keithley	1,288	.....	.....	5	.....	.....	.....	5	.....
Camp Gregg	859	.....	.....	.....	.....	1	1	1	1
Correy Barracks	314	.....	.....	.....	.....	1	.....	1	.....
Field, Department Luzon	1,132	.....	.....	.....	.....	1	.....	1	.....
Philippines division, total	18,522	.....	.....	5	.....	3	1	8	1

MALARIAL FEVERS.

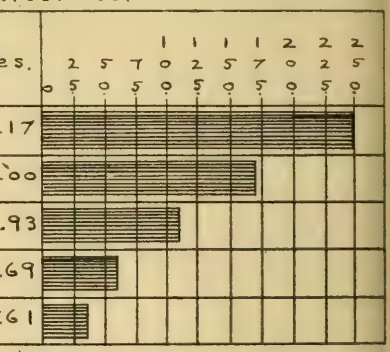
The admission rate for all fevers of this class was 171.00, as compared with 75.56 for 1911, 86.34 for 1910, 112.35 for 1909, 123.97 for 1908, 167.79 for 1907, and 304.20 for 1906. Malarial fevers stand second among causes of admission for disease for American troops. It will be noted that the rate for 1912 was higher than that for any year since 1906. The reason for the great increase is not apparent. It is true that the greatest increase occurred in the Department of Mindanao, where the troops were in the field a great deal engaged in operations against hostile natives. However, there was also an increase in the rates for all, except a few, of the posts in the Department of Luzon. The table below gives the rates at all posts in the Philippine Islands where the majority of the garrison was American troops. It will be noted that only four posts showed a decreased rate, namely, Fort Mills, Cuartel de Espana (Manila), Warwick Barracks, and Camp John Hay. It is difficult to understand why field service and meteorological conditions should have caused such a large increase in the rate for American troops without causing same increase in the rate for the native troops, who had fully as much field

Chart VV

Admission, Discharge, Death and Noneffective Rates for Special Diseases, Philippine Islands American Troops Enlisted Men, year, 1912.

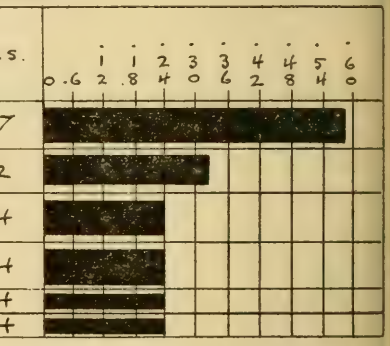
Admissions.

	Rates.
Venereal Diseases.	249.17
Malarial Fevers.	171.00
Dengue.	108.93
Diarrhea and Enteritis.	60.69
Furunculosis.	35.61



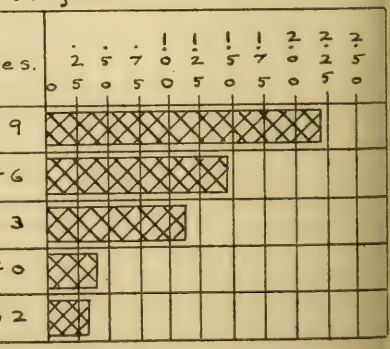
Deaths.

	Rates.
Tuberculosis.	.57
Malarial Fevers.	.32
Venereal Diseases.	.24
Alcoholism.	.24
Appendicitis.	.24
Abscess of the Liver.	.24



Discharges.

	Rates.
Mental Alienation.	2.19
Tuberculosis.	1.46
Venereal Diseases.	1.13
Flat Feet.	.40
Otitis Media.	.32



Noneffective.

	Rates.
Venereal Diseases.	16.55
Malarial Fevers.	3.51
Dengue	1.90
Dysentery.	1.12
Diarrhea and Enteritis.	1.05

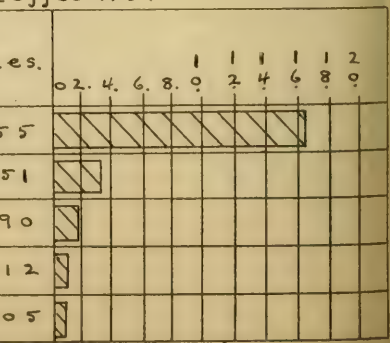
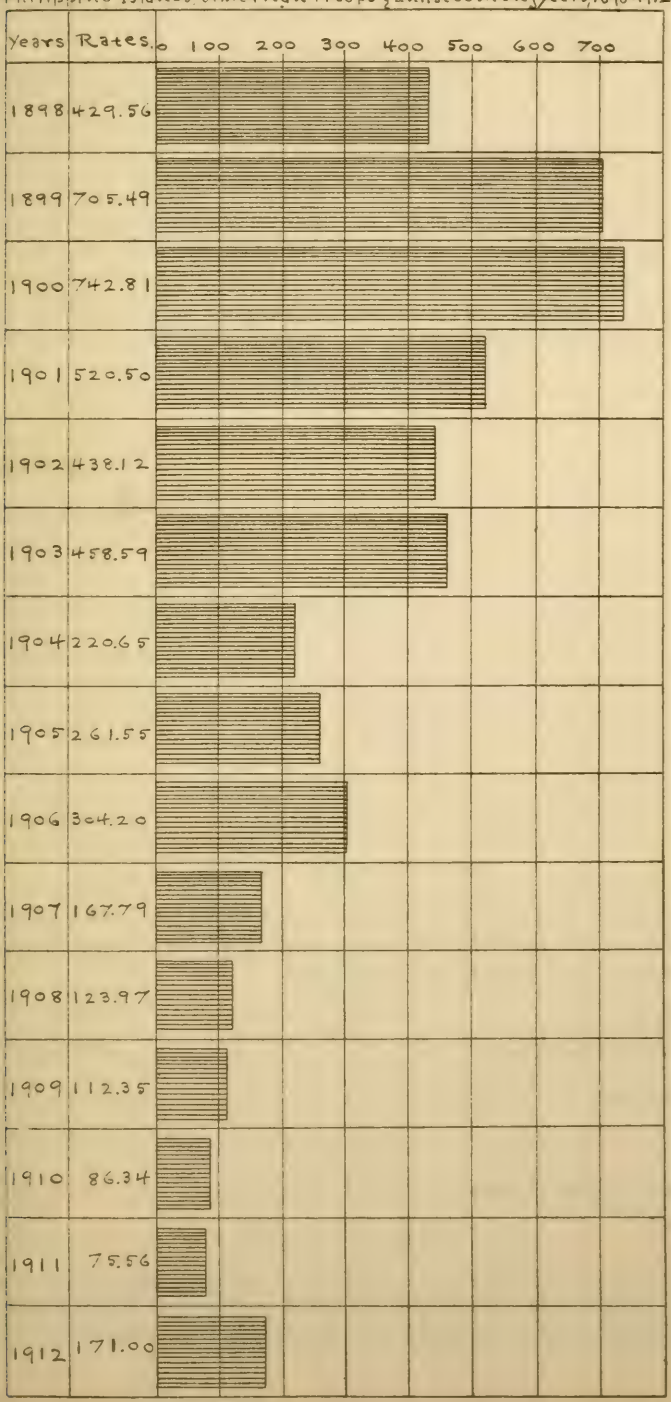


Chart X.

Malarial Fevers.
Admission Rates.

Admission Rates for Malarial Fevers for the Philippine Islands. American Troops, Enlisted Men, Years, 1898-1912.

Years	Rates.
1898	429.56
1899	705.49
1900	742.81
1901	520.50
1902	438.12
1903	458.59
1904	220.65
1905	261.55
1906	304.20
1907	167.79
1908	123.97
1909	112.35
1910	86.34
1911	75.56
1912	171.00



service and who were exposed to the same meteorological conditions The rate for the native troops showed a slight decrease, being 241.9 in 1912 and 242.12 in 1911. At the suggestion of this office, a cable gram was sent by The Adjutant General to the commanding general Philippine Department, June 30, 1913, calling attention to the grea increase in the rate for this cause for American troops.

The post having the highest admission rate was Ludlow Barracks Mindanao, with a rate of 550.00 per 1,000. The second highest admis sion rate was for Augur Barracks, 459.39 per 1,000. The rates fo these posts in 1911 was 51.57 and 279.30, respectively. The Depart ment of Mindanao had the higher rate, 385.52 per 1,000. The rat for the Department of Luzon was 97.32 per 1,000. The rate for th Department of Mindanao in 1911 was 146.60 and for Luzon 58.9 per 1,000.

TABLE No. 31.—*Malarial fevers, year 1912, compared with 1911, for posts in the Philip pine Islands in which the commands are composed principally of American troops— Officers and enlisted men.*

Posts.	Ratios per 1,0 of mean strength.	
	1912	1911
Ludlow Barracks, Mindanao	550.00	51.
Augur Barracks, Mindanao	459.39	279.
Pettit Barracks, Mindanao	338.58	104.
Camp Overton, Mindanao	335.71	74.
Camp Stotsenburg, Luzon	259.74	238.
Camp Keithley, Mindanao	198.76	44.
Fort Wint, Luzon	194.33	83.
Camp Downes, Luzon	191.11	19.
Camp Eldridge, Luzon	145.65	84.
Fort William McKinley, Luzon	104.71	22.
Camp McGrath, Luzon	50.36	16.
Fort Mills, Luzon	45.37	101.
Camp Jossman, Luzon	31.86	23.
Cuartel de Espana, Luzon	22.97	7.
Warwick Barracks, Luzon	6.17	17.
Camp John Hay, Luzon	9.35	6.
Santiago and Headquarters, Manila	10.58	27.

UNDETERMINED FEVERS.

The admission rate for these fevers was 15.46 per 1,000, as compare with 6.74 for 1911, 10.75 for 1910, and 25.46 for 1909. The variou diagnoses under this head are as follows:

Febricula	1
Fevers, simple, continued	
Fever, type undetermined	
Total cases	1

SMALLPOX.

No case of this disease occurred.

VENEREAL DISEASES.

Venereal diseases still hold first place for both admissions and noi effective rate. About one-fourth of the total number of admissior for disease were due to venereal diseases. There were 1,719 admi

sions for gonorrhea, 832 for chancroid, and 528 for syphilis. A little more than two-fifths of the total noneffective rate for disease was due to venereal diseases. It is a source of satisfaction to this office, however, to be able to state that the rates for these diseases were better in 1912 than 1911. The noneffective rate in 1912 was 16.55 and in 1911 16.63 per 1,000. The admission rate in 1912 was 249.17, and in 1911 305.12 per 1,000. As has been stated under the discussion for the Army, and for the United States, the rates for the white troops showed a very material improvement, but the excessively high rate for the colored troops prevented a greater decrease in the total figures for the American troops. The noneffective and admission rates for white troops in 1912 was 15.92 and 215.43, and in 1911, 16.63 and 305.12 per 1,000. Those for the colored troops in 1912 were 21.70 and 524.06 per 1,000. There were no colored troops serving in the Philippine Islands in 1911.

Venereal diseases, Philippine Islands.

	Syphilis.	Chancroids.	Gonorrhea.	Total.
White troops, 1912	45.07	56.06	114.30	215.43
1911	78.05	88.48	138.59	305.12
Colored troops, 1912	23.69	159.14	341.23	524.06
All American troops, 1912	42.73	67.33	139.11	249.17
1911	78.05	88.48	138.59	305.12

In accordance with the recommendation of this office The Adjutant General, on July 16, 1913, sent a cablegram to the commanding general Philippine Department calling attention to the excessively high rates among the colored troops and the high rates at the three posts other than Camp Jossman, with the highest rates. The colored troops were stationed at Camps Jossman, McGrath, and Stotsenburg.

TABLE No. 32.—*Venereal diseases at posts in the Philippines having strength of more than 300 men (principally American troops), year 1912—Officers and enlisted men.*

Posts.	Admissions.		Mean strength.
	Total.	Ratio.	
Camp Jossman	182	446.08	408
Camp McGrath	355	425.66	834
Fort William McKinley	1,015	314.44	3,228
Camp Stotsenburg	376	305.19	1,232
Camp Eldridge	100	217.39	460
Augur Barracks	232	209.39	1,108
Cuartel de Espana	130	175.68	740
Fort Santiago and Headquarters Philippines Division	55	145.50	378
Warwick Barracks	44	135.80	324
Ludlow Barracks	63	108.62	580
Camp Connell[1]	36	103.45	348
Fort Mills	127	76.83	1,653
Regan Barracks[1]	25	75.53	331
Camp Keithley	93	72.20	1,288
Pettit Barracks	35	68.90	508
Camp Gregg[1]	37	43.07	859
Torrey Barracks[2]	12	38.22	314

[1] At Camp Connell, Regan Barracks, and Camp Gregg the commands were composed almost entirely of Philippine Scouts.
[2] About two-thirds of the command at Torrey Barracks were Philippine Scouts.

ALCOHOLISM AND ITS RESULTS.

The admission rate, 21.20, was lower than 28.50 for 1911. The noneffective rate was 0.35 in 1912 and 0.43 per 1,000 in 1911. The rates for 1911 were for white troops, as there were no colored troops in the islands. In 1912 the noneffective and admission rates for white troops were 0.36 and 22.17. Those for colored troops were 0.26 and 13.32.

CHOLERA.

No case of this disease occurred during the year, nor were any epidemics reported in the vicinity of military posts.

TUBERCULOSIS.

There were 62 cases among the American troops, a ratio of 5.02 per 1,000. These cases were all promptly transferred home, and no deaths occurred there from the disease. The seven deaths reported occurred in cases transferred to the United States. In 1911 there were 47 cases with a ratio of 3.77 and in 1910, 67 cases, with a rate of 5.46 per 1,000.

BERIBERI.

No case of this disease occurred among the American troops.

DYSENTERY.

The occurrence of this disease shows an increase over 1911, being 16.91 per 1,000, as compared with 14.37 per 1,000 for 1911, 19.39 for 1910, 43.06 for 1909, and 26.23 for 1908. There were 167 cases of entamoebic dysentery, with a rate of 13.51, 11 cases of bacillic, with a rate of 0.89, and 31 unclassified, with a rate of 2.51 per 1,000. The noneffective rate for all dysentery was 1.12 per 1,000 for 1912 and 0.90 for 1911.

DENGUE.

This disease had the third highest admission and noneffective rate. There were 1,346 cases with an admission rate of 108.93 per 1,000 and noneffective rate of 1.90, as compared with 1,444 admissions in 1911, with an admission rate of 115.95 and noneffective rate of 1.99. There were no deaths or discharges for disability resulting.

MENTAL ALIENATION.

As there are several mental conditions grouped this year under this heading which were formerly not included under the term insanity, no comparison can be made between the two. The admission rate for mental alienation was 3.56 for American troops in the Philippine Islands. In the United States the rate was 3.26.

DIARRHEA AND ENTERITIS.

The admission rate for these diseases shows quite a large increase over 1911, being 60.69 per 1,000, as compared with 46.09 for 1911, 74.86 for 1910, and 59.79 for 1909. The noneffective rate was 1.05 per 1,000 in 1912, as compared with 0.92 for 1911 and 1.38 for 1910.

INVALIDING TO THE UNITED STATES.

The diseases causing the highest number of men to be invalided home were with actual numbers: Tuberculosis, 56; mental alienation, 45; gonorrhea, 21; syphilis, 10; and dysentery and chronic alcoholism, each 6.

TABLE NO. 33.—*Enlisted men invalided home from the Philippine Islands.*

Causes.	Number of cases.	Percentage of total cases.	Duty.	Discharged on certificate of disability.	Died.	Otherwise disposed of.	Remaining at end of year.
Tuberculosis	56	25.69	.....	12	5	1	38
General paralysis of the insane, and other forms of mental alienation	45	20.64	2	32	.....	.....	11
Gonorrhea	21	9.63	4	9	.....	.....	8
Syphilis	10	4.59	3	5	.....	.....	2
Dysentery	6	2.75	5	1	.....	.....	.....
Chronic alcoholism	6	2.75	.....	3	.....	1	2
Chronic otitis media	5	2.29	.....	4	.....	.....	1
Secondary results of injury	5	2.29	1	3	.....	.....	1
Hysteria	4	1.83	.....	2	.....	.....	2
Asthma	4	1.83	1	3	.....	.....	.....
Fractures, exclusive of gunshot	4	1.83	.....	4	.....	.....	.....
Epilepsy	3	1.38	.....	3	.....	.....	.....
Chronic bronchitis	3	1.38	3	.....	.....	.....	.....
Drug habit	2	.92	.....	2	.....	.....	.....
Chronic gastritis	2	.92	.....	.....	.....	.....	2
Abscess of the liver	2	.92	1	.....	.....	.....	1
Enuresis	2	.92	.....	1	.....	.....	1
Cancer	2	.92	.....	1	1	.....	.....
Flat foot	2	.92	.....	2	.....	.....	.....
Incised wounds	2	.92	.....	2	.....	.....	.....
Locomotor ataxia	2	.92	.....	1	.....	.....	1
Exophthalmic goiter	1	.46	1	.....	.....	.....	.....
Appendicitis	1	.46	.....	.....	1	.....	.....
Chronic articular rheumatism	1	.46	.....	1	.....	.....	.....
Diabetes mellitus	1	.46	.....	1	.....	.....	.....
Progressive muscular atrophy	1	.46	.....	1	.....	.....	.....
Cerebral hemorrhage	1	.46	.....	1	.....	.....	.....
Neuritis	1	.46	.....	.....	.....	1	.....
Traumatic neurosis	1	.46	.....	.....	.....	.....	1
Trachoma	1	.46	.....	1	.....	.....	.....
Hypermetropia	1	.46	1	.....	.....	.....	.....
Hypertrophy of the heart	1	.46	.....	.....	.....	.....	1
Phlebitis	1	.46	.....	1	.....	.....	.....
Broncho-pneumonia	1	.46	1	.....	.....	.....	.....
Chronic fibrinous pleurisy	1	.46	.....	.....	.....	.....	1
Ulcer of the stomach	1	.46	.....	.....	.....	.....	1
Chronic colitis	1	.46	.....	.....	.....	.....	1
Chronic gastroenteritis	1	.46	.....	1	.....	.....	.....
Fistula in ano	1	.46	.....	.....	.....	.....	1
Sprue	1	.46	1	.....	.....	.....	.....
Nephrolithiasis	1	.46	.....	1	.....	.....	.....
Chronic nephritis	1	.46	.....	.....	1	.....	.....
Chronic cystitis	1	.46	.....	1	.....	.....	.....
Painful testicle, post operative	1	.46	.....	.....	.....	.....	1
Necrosis	1	.46	1	.....	.....	.....	.....
Arthritis	1	.46	.....	1	.....	.....	.....
Punctured wounds	1	.46	.....	.....	.....	.....	1
Crushing	1	.46	.....	1	.....	.....	.....
Dislocation	1	.46	.....	1	.....	.....	.....
Sprain	1	.46	.....	1	.....	.....	.....
Ruptured liver	1	.46	1	.....	.....	.....	.....
Total cases	218	.....	26	103	8	3	78
Percentage of total cases	.....	100.00	11.93	47.25	3.67	1.38	35.78

INFLUENCE OF STATION.

The Department of Mindanao had the higher rates for admissions, discharges for disability, deaths, and total losses, while the Department of Luzon had the higher noneffective rate and higher average number of days lost for each case.

TABLE NO. 34.—*Movement of sick enlisted American troops in the Philippines, year 1912.*

	Mean strength.	Ratio per 1,000 of mean strength.												Average number of days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective from sickness.				From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
		From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.		For each soldier.	For each case.	For each soldier.	For each case.
										Total.	In hospital.	Total.	In hospital.				
Department of Luzon	9,186	1,216.09	737.11	8.17	5.55	4.35	2.17	12.52	7.72	38.81	34.67	18.74	16.66	14.21	11.68	6.86	9.30
Department of Mindanao	3,053	1,238.13	941.04	12.77	10.48	6.22	2.29	18.99	12.77	36.71	35.74	22.13	21.65	13.44	10.85	8.10	8.60
Philippines Division	12,357	1,246.99	803.92	9.63	6.96	5.42	2.51	15.05	9.47	44.74	41.41	22.93	21.26	16.37	13.13	8.39	10.44

NOTE.—Division hospital and interisland transports not included in departments, but are included in the division.

INFLUENCE OF SEASON.

Exclusive of injuries, venereal diseases, alcoholism, and vaccinia, which are not influenced by season, the highest admission rate occurred in July and the highest noneffective rate was in July and the second highest in June.

TABLE NO. 35.—*Influence of season on enlisted American troops in the Philippines, year 1912.*

Months.	Mean strength.	Ratio per 1,000 of mean strength.								Prevailing diseases (exclusive of venereal diseases, etc.).
		All causes.					Exclusive of venereal diseases, alcoholism, vaccinia, and injuries.			
		Admissions.			Noneffective.					
		Total.	Hospital.	Deaths.	Total.	Hospital.	Admissions.	Deaths.	Noneffective.	
January	14,315	100.03	91.02	0.63	43.50	39.97	58.95	0.21	20.91	Malarial fever 151, diarrhea and enteritis 68, constipation 46, dengue 44.
February	15,180	84.78	68.05	.40	42.84	39.36	51.38	.....	20.97	Malarial fever 180, diarrhea and enteritis 62, dengue 38, acute abscesses 31.
March	13,718	100.45	87.11	.36	45.16	41.72	65.24	.15	22.99	Malarial fever 287, furuncles 44, dengue 73, diarrhea and enteritis 68.
April	13,373	97.62	88.63	.74	45.03	41.53	68.45	.44	22.38	Malarial fever 288, dengue 110, diarrhea and enteritis 69, furuncles 36.
May	12,075	113.87	105.26	.33	46.90	43.75	75.11	.08	23.96	Malarial fever 234, dengue 140, diarrhea and enteritis 64, constipation 36.
June	11,040	124.46	115.31	.45	52.05	48.51	84.15	.....	25.66	Malarial fever 273, dengue 126, diarrhea and enteritis 65, furuncles 40.
July	11,275	136.14	123.99	.35	51.50	48.34	92.41	.18	26.99	Malarial fever 219, dengue 157, diarrhea and enteritis 71, constipation 61, furuncles 54.
August	11,478	121.62	106.90	.35	48.77	44.26	83.20	.09	25.36	Malarial fever 134, dengue 246, diarrhea and enteritis 119, constipation 46.
September	11,585	112.99	98.83	.17	48.07	43.18	67.93	.....	23.81	Malarial fever 104, dengue 151, diarrhea and enteritis 63.
October	11,321	99.46	88.51	.44	43.60	40.00	61.74	.26	22.25	Malarial fever 95, dengue 145, diarrhea and enteritis 34, constipation 37.
November	11,174	84.57	75.17	.54	35.23	33.44	52.17	.09	20.59	Malarial fever 75, dengue 61, furuncles 39.
December	11,546	80.28	74.13	.61	35.35	34.06	50.58	.09	20.61	Malarial fever 73, dengue 55, diarrhea and enteritis 34.
Totals.	12,357	1,246.99	1,112.41	5.42	44.74	41.41	803.92	2.51	22.93	Malarial fever 2,113, diarrhea and enteritis 717, dengue 1,346, furuncles 213.

The highest rate for malarial fevers was in April, and for dengue in August. The lowest admission rate was in February and the lowest

noneffective rate in November. The highest death rate occurred in April. As the influence of season varies so widely for the different islands, it is hardly possible to obtain any accurate information by comparing the division as a whole.

INFLUENCE OF AGE (DISEASE ONLY).

Excluding injuries, the highest admission rate was for those under 20 years of age, and the highest noneffective rate for those 20 to 24. The noneffective and admission rates were lowest for those 45 to 49 years. The death rate was highest for those 40 to 44 years of age. The discharge rate was highest for those 25 to 29 years of age.

LENGTH OF SERVICE (DISEASE ONLY).

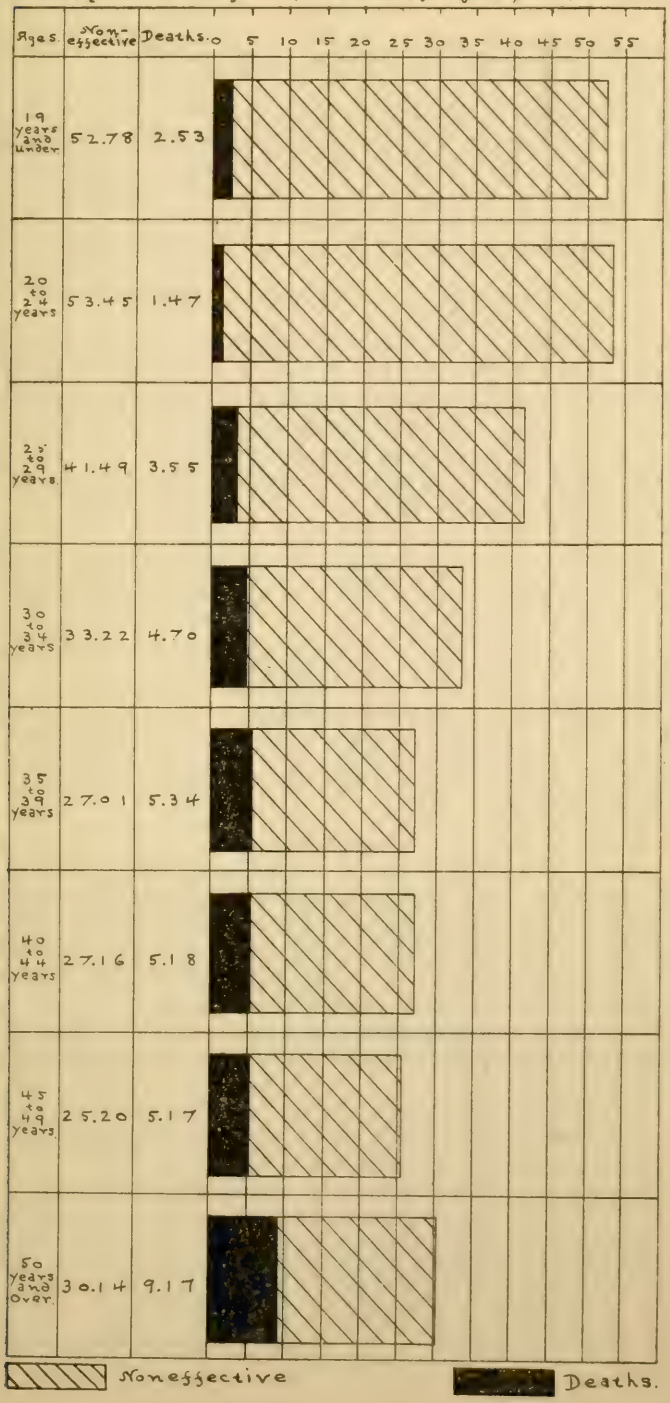
Excluding injuries the highest noneffective and admission rates occurred in the first year of service; the second highest noneffective and admission rates in the second year; the lowest noneffective and admission in those having 10 years or over. The highest discharge rate occurred in the second year of service, and the lowest in the third. The highest death rate was in those having between five and ten years' service, and the lowest for those in the first year of service.

TABLE No. 36.—*Influence of disease by length of service, age, and arms of service, on American troops in the Philippines, year 1912—Enlisted men.*

	Mean strength.	Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.	Ratio per 1,000 of mean strength. Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.
Length of service:									
Under 1 year	2,610	3,957	23	2	154.07	1,516.09	8.81	0.77	59.03
1 to 2 years	2,805	4,090	36	6	148.05	1,458.11	12.83	2.14	52.78
2 to 3 years	1,263	873	5	2	27.49	691.22	3.96	1.58	21.76
3 to 4 years	852	685	6	3	29.48	803.99	7.04	3.52	34.60
4 to 5 years	880	899	7	2	33.70	1,021.59	7.95	2.27	38.30
5 to 10 years	1,651	1,413	14	11	50.61	855.84	8.48	6.66	30.65
10 years and over	2,296	1,371	12	11	48.99	597.13	5.23	4.79	21.34
Total	12 357	13,288	103	37	492.39	1,075.34	8.34	2.99	39.85
Age:									
19 years and under	500	674	3	1	23.51	1,348.00	6.00	2.00	47.02
20 to 24 years	5,038	6,567	38	4	239.19	1,303.49	7.54	.79	47.48
25 to 29 years	2,975	3,275	36	10	128.08	1,100.84	12.10	3.36	43.05
30 to 34 years	1,819	1,567	14	11	57.92	861.46	7.70	6.05	31.84
35 to 39 years	1,079	644	10	4	22.03	596.85	9.27	3.71	20.41
40 to 44 years	639	403	1	7	15.46	630.67	1.56	10.95	24.19
45 to 49 years	243	115	1	.....	4.50	473.25	4.12	.....	18.52
50 years and over	64	43	.....	.....	1.70	671.87	.....	.....	26.55
Total	12,357	13,288	103	37	492.39	1,075.34	8.34	2.99	39.85
Arms of service:									
Infantry	6,428	6,740	46	25	251.07	1,048.54	7.16	3.89	39.06
Cavalry	2,676	3,336	24	6	127.36	1,246.64	8.97	2.24	47.56
Field Artillery	801	1,032	12	1	35.81	1,288.39	14.98	1.25	44.70
Coast Artillery	1,120	906	10	1	31.25	808.93	8.93	.89	27.90
Ordnance	70	29	.....	.....	.69	414.29	.....	.....	9.91
Engineers	304	340	2	1	10.91	1,118.42	6.58	3.29	35.89
Signal Corps	163	114	.....	.....	4.57	699.39	.....	.....	28.04
Hospital Corps	711	534	9	3	16.33	751.05	12.66	4.22	22.97
All others	84	257	.....	.....	14.40	3,059.52	.....	.....	171.42
Total	12,357	13,288	103	37	492.39	1,075.34	8.34	2.99	39.85

Chart Y.

Noneffective and Death Rates for Disease, by Ages, American Troops (Enlisted Men) Philippine Islands, for five years, 1908–1912.



PHILLIPPINE SCOUTS.

The improvement in the health of the native troops in the Philippine Islands noted in the annual reports of this office in years past was not maintained in 1912. While the admission rate showed a slight improvement, the noneffective rate was slightly higher in 1912 than in 1911. The mean strength of these native troops during the year was 5,407 (Surgeon General's Office) and 5,493 (Adjutant General's Office).

CONSTANTLY NONEFFECTIVE RATES.

The total noneffective rate for 1912 was 20.32 per 1,000 as compared with 19.86 in 1911. The rate for disease was 17.92 per 1,000 in 1912, and 17.69 in 1911, while that of injuries was 2.40 in 1912 and 2.17 per 1,000 in 1911. Thus the total rates, that for disease and that for injuries, were all higher in 1912 than in 1911. The following tabulations shows noneffective rates of the principal diseases in 1912, and the corresponding rates for 1911:

	1912	1911		1912	1911
Lower in 1912.			*Higher in 1912.*		
Malarial fevers	4.19	4.55	Venereal diseases	3.75	3.63
Dysenteries	.38	.52	Tuberculosis (all)	.91	.34
Typhoid fever	.10	.38	Dengue	.33	.31
Beriberi	.05	.12	Bronchitis	.76	.57
Alcoholism	.003	.004	Febricula	.19	.12

The rate for diarrhea and enteritis was exactly the same in 1912 a in 1911, being 0.26 per 1,000.

ADMISSIONS.

During the year there were 3,667 admissions for all causes, giving a case admission rate of 678.20 per 1,000. The rate for disease was 617.16 and that for injury 61.04 per 1,000. The admission rate for 1911 for all causes was 744.78; for disease, 666.54, and for injuries, 78.24 per 1,000. It is thus apparent that the rates for 1912 were all slightly lower than the corresponding rates in 1911. The following tabulation gives the rates for some of the principal diseases in 1912 and 1911:

	1912	1911		1912	1911
Lower in 1912.			*Higher in 1912.*		
Malarial fevers	241.91	242.12	Dengue	23.12	15.38
Venereal diseases	55.67	58.11	Tuberculosis (all)	5.92	3.23
Dysenteries	7.03	7.79	Bronchitis	28.30	21.65
Diarrhea and enteritis	18.86	20.89	Febricula	10.36	8.55
Typhoid fever	.56	2.28			
Alcoholism	.37	.76			
Beriberi	.37	.57			

It must be held in mind that the rates above for 1912 are case admissions and in 1911 total admissions. The total admission rates for malarial fevers and venereal diseases are slightly higher than the corresponding rates in 1911.

TABLE NO. 37.—*Movement of sick, Philippine Scouts, enlisted men, year 1912.*

	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
	Total.	In hospital.	Total.	In hospital.
Ratio per 1,000 of mean strength:				
Admissions to sick report	678.20	610.32	560.39	.....
Discharges on certificate of disability	8.19	.....	6.55	.....
Deaths	4.37	.....	3.09	.....
Total losses	14.56	.....	9.64	.....
Noneffective	20.32	19.18	14.16	13.41
Average number of days lost:				
For each soldier	7.44	7.02	5.18	4.91
For each case	10.96	11.50	9.25	.....

DISCHARGE FOR DISABILITY.

In 1912 there were 45 discharges on certificate of disability with a rate of 8.19 as compared with 26 and a rate of 4.94 for 1911. Tuberculosis caused 23 discharges in 1912 and 11 in 1911; venereal diseases 2 in 1912 and none in 1911; mental alienation 5 in 1912 and insanity 5 in 1911, and external causes 7 in 1912 and 3 in 1911.

TABLE NO. 38.—*Causes of discharge for disability, Philippine Scouts, year 1912.*

Causes of discharge.	Number discharged.	Percentage of discharges for disease.	In line of duty.	Not in line of duty.	
				Contracted before enlistment.	Contracted after enlistment.
General diseases	27	71.05	25	.....	2
Tuberculosis (of the lungs, 22; other organs, 1)	23	60.53	23	.....	.....
Venereal diseases (arthritis chronic, 1; urethritis, chronic, 1)	2	5.26	.....	.....	2
Erysipelas	1	2.63	1	.....	.....
Cancer	1	2.63	1	.....	.....
Diseases of the nervous system and organs of special sense	8	21.05	5	3	.....
Mental alienation	5	13.16	3	2	.....
Hysteria	1	2.63	.....	1	.....
Neurasthenia, chronic	1	2.63	1	.....	.....
Retino choroiditis	1	2.63	1	.....	.....
Diseases of the digestive system	2	5.26	1	1	.....
Dental caries	1	2.63	.....	1	.....
Fistula in ano	1	2.63	1	.....	.....
Diseases of the bones and organs of locomotion	1	2.63	1	.....	.....
Muscular rheumatism, chronic	1	2.63	1	.....	.....
Total for disease	38	100.00	32	4	2
External causes	7	100.00	7	.....	.....
Gunshot wounds	3	42.86	3	.....	.....
Incised wounds	3	42.86	3	.....	.....
Crushing	1	14.28	1	.....	.....
Total for disease	38	84.44	32	4	2
Total external causes	7	15.56	7	.....	.....
Grand total	45	100.00	39	4	2

DEATHS.

There were 24 deaths with a rate of 4.37 per 1,000 in 1912, and 24 with a rate of 4.56 in 1911. There were 4 deaths from tuberculosis in 1912 and 2 in 1911, 3 from malarial fever in 1912 and 3 in 1911, 2 from pneumonia (acute lobar) in 1912 and 2 in 1911, and 7 from external causes in 1912, and 7 in 1911. There were three killed in action, two by gunshot and one by a cutting weapon. There was one death from suicide and one homicide. In 1911 there was no death in action among these troops.

TABLE No. 39.—*Causes of death among Philippine Scouts, year 1912.*

Causes of death.	Number of deaths.	Ratio per 1,000 of—	
		Mean strength.	Total deaths.
DISEASES.			
Tuberculosis (abdominal, 3; other organs, 1)	4	0.73	235.29
Malarial fever (estivo-autumnal, 2; tertian, 1)	3	.55	176.47
Pneumonia, acute lobar	2	.36	117.65
Typhoid fever	1	.18	58.82
Purulent infection	1	.18	58.82
Cancer	1	.18	58.82
Cerebral hemorrhage	1	.18	58.82
Ascaris lumbricoids	1	.18	58.82
Cholecystitis	1	.18	58.82
Chronic parenchymatous nephritis	1	.18	58.82
Sudden death, cause unknown	1	.18	58.82
Total	17	3.09	1,000.00
EXTERNAL CAUSES.			
Gunshot wounds (in action, 2; homicidal, 1)	3	.55	428.57
Punctured wounds (suicidal, 1; not given, 1)	2	.36	285.71
Incised wounds (in action)	1	.18	142.86
Acute poisoning (accidentally drinking hard oil containing a large amount of turpentine, in mistake for castor oil)	1	.18	142.86
Total	7	1.27	1,000.00
Total disease	17	3.09	708.33
Total external causes	7	1.27	291.67
Grand total	24	4.37	1,000.00

SPECIAL DISEASES, PHILIPPINE SCOUTS.

TYPHOID FEVER.

Three cases of this disease occurred among the native troops, with one death. On page 52 will be found a table giving the date and place of occurrence. One of the cases in question had been immunized. This case recovered.

MALARIAL FEVERS.

The admission rate for all fevers of this class was 241.91, as compared with 242.12 in 1911. The cause that lessens the venereal rate among the native troops operates in like manner to increase the malarial rate. The majority of them, being married men, sleep to a greater or less extent outside of the barracks, and hence without the protection of mosquito nets.

VENEREAL DISEASES.

This class of disease constitutes the second cause of admission among these troops. The noneffective rate was 3.75 per 1,000, and admission rate 55.67 per 1,000, as compared with 3.63 and 58.11 for 1911. There were 225 admissions for gonorrhea, 48 for chancroids, and 28 for syphilis in 1912, as compared with 243, 35, and 28, respectively, in 1911. These diseases caused about one-eleventh of the total number of admissions for disease, while among the American troops in the Philippines they caused about one-fourth of the total number of admissions for disease. The good showing of the native is, to a large extent, due to the fact that a large percentage of them are married.

SMALLPOX.

There were 2 cases of this disease without a death or discharge. In 1911 there were 11 cases without a death or discharge.

CHOLERA.

No case of this disease occurred during the year.

TUBERCULOSIS.

There were 32 cases of this disease, the admission rate being 5.92 per 1,000. There were 4 deaths and 23 discharges.

DYSENTERIES.

The admission rate was 7.03, as compared with 7.79 for 1911 and 10.01 for 1910. There were 38 cases, 24 of them being entamebic.

DENGUE.

The admission rate was 23.12 and noneffective rate 0.33 per 1,000, as compared with 15.38 and 0.31 in 1911.

DIARRHEA AND ENTERITIS.

The admission rate was 18.86, as compared with 20.89 for 1911.

ALCOHOLISM AND RESULTS.

For the native troops the admission rate was 0.37 and the noneffective rate was 0.003 per 1,000. There were two admissions.

BERIBERI.

In the report of 1910 and 1911 it was pointed out that this disease had practically disappeared from among the native troops, as a result of the change in diet, following the recommendation of the tropical board. Only 2 cases occurred in 1912. The admission, noneffective, death, and discharge rates for 1912 were, respectively 0.37, 0.05, 0.00,

0.00, as compared with 0.57, 0.12, 0.19 and 0.00 per 1,000 in 1911, 11.00, 1.66, 0.38 and 0.38 in 1910, and 103.93, 11.96, 2.17 and 5.96 for 1909.

UNDETERMINED FEVERS.

The admission rate for febricula and undetermined fevers was 10.36 in 1912, and 8.55 per 1,000 in 1911. The noneffective rate was 0.19 in 1912 and 0.12 in 1911.

SURGICAL OPERATIONS.

One hundred and thirty-four surgical operations were performed upon Philippine Scouts, 133 of which were successful. There was no death following operation. The anesthetic used was chloroform in 5 cases, ether in 33, chloroform and ether in 1, and local anesthetic in 61. No anesthetic was required in 34 operations.

TABLE No. 40.—*Surgical operations performed on Philippine Scouts, 1912.*

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	EYE.										
Transplantation, 1; u h's operation, 1.	Pterygium	2	2							2	
	EAR.										
Mastoidotomy, curetment, and drainage.	Mastoiditis	1	1					1			
Mastoidotomy and drainage	Mastoid abscess	1	1					1			
Paracentesis	Otitis media	1	1							1	
	MOUTH AND PHARYNX.										
Curetment	Adenoids, pharyngeal	1	1							1	
	NECK AND THORAX.										
Resection of rib	Empyema	1	1							1	
	ABDOMEN.										
Incision and drainage, 1; McBurney's operation, 1; appendectomy, 4.	Appendicitis	6	6					6			
Bassini's operation	Inguinal hernia	1	1					1			
	ANUS AND RECTUM.										
Curetment	Ischio-rectal abscess	1	1							1	
Incision and drainage	Abscess of rectum	1	1					1			
Incision and curetment, 2; excision and drainage, 2.	Fistula in ano	4	4					3		1	
	GENITO-URINARY SYSTEM.										
Jaboulay's operation	Hydrocele	2	2					1		1	
Incision and drainage	Abscess, periurethral	1	1							1	
Circumcision	Redundant prepuce	2	2							2	
Do	Phimosis	1	1							1	
	VASCULAR SYSTEM.										
Ligation and excision	Thrombosis posterior external jugular.	1	1							1	
Ligation	Varicose veins	1	1					1			

TABLE No. 40.—*Surgical operations performed on Philippine Scouts, 1912*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	SKIN AND CELLULAR TISSUE.										
ncision and drainage	Abscess	37	37	....	....	....	1	1	....	15	20
Do	Cellulitis	10	9	....	1	....	....	2	....	4	4
Do	Carbuncle	1	1	....	....	....	....	....	....	....	1
ncision and curetment	Sinus	1	1	....	....	....	....	....	....	1	....
Excision, 2; Anger's operation, 3; Von Natta's operation, 1.	Ingrowing toe nail	6	6	....	....	....	....	....	....	6	....
Avulsion	Hooked nail	2	2	....	....	....	1	....	....	1	....
	LYMPHATIC GLANDS.										
Excision, 5; incision and drainage, 25.	Bubo, nature not stated	9	30	....	....	....	1	7	....	14	8
	Bubo, climatic	1									
	Adenitis, nature and location not stated.	20									
	MUSCLES, TENDONS, FASCIÆ, LIGAMENTS, AND BURSÆ.										
ncision and drainage	Myositis interstitial	1	1	....	....	....	....	....	....	....	1
Do	Bursitis	1	1	....	....	....	....	....	....	1	....
Excision	Ganglion	1	1	....	....	....	....	....	....	1	....
	BONES.										
equestrectomy	Osteitis 2nd phalanx, thumb.	1	1	....	....	....	....	1	....	....	....
ncision and curetment	Periostitis	1	1	....	....	....	....	....	....	1	....
	JOINTS.										
ncision and drainage	Arthritis, ankle joint, gonorrheal	2	2	....	....	....	....	2	....	....	....
	AMPUTATIONS.										
mputation arm, lower third	Incised wound, severe	1	1	....	....	....	1	....	....	....	....
mputation forearm, lower third.	.....do	1	1	....	....	....	1	....	1	....	....
te-amputation, forearm, lower third.	.....do	1	1	....	....	....	....	....	....	....	....
mputation leg, lower third	Crushing of leg	1	1	....	....	....	....	1	....	....	....
mputation finger	Gangrene, traumatic	1	1	....	....	....	....	....	....	1	....
Do	Osteoma	1	1	....	....	....	....	1	....	....	....
mputation fourth and fifth fingers, metacarpo-phalangeal.	Gunshot wound	1	1	....	....	....	....	1	....	....	....
	TUMORS.										
Excision	Cystic tumor	1	1	....	....	....	....	....	....	1	....
Do	Fibroma	1	1	....	....	....	....	....	....	1	....
Do	Lipoma	1	1	....	....	....	....	....	....	1	....
	MISCELLANEOUS.										
ncision, through and through drainage.	Gunshot wound knee	1	1	....	....	....	....	1	....	....	....
umbo-inguinal drainage, extraperitoneal.	Sanguino-purulent abscess, lumbo-inguinal.	1	1	....	....	....	....	1	....	....	....
Total number of cases		134	133	....	1	....	5	33	1	61	34

INFLUENCE OF SEASON.

Excluding injuries, venereal diseases, alcoholism, and vaccinia, ove which causes of admission the seasons have little or no influence, th highest admission rate was in March and the lowest in December. Th highest constant noneffective rate was in March and the lowest i November. The highest rate for malarial fevers was in June; fo American troops it was in April.

TABLE No. 41.—*Influence of season on Philippine Scouts, year 1912.*

Months.	Mean strength.	Ratio per 1,000 of mean strength.								Prevailing diseases (exclusive venereal diseases, etc.).
		All causes.					Exclusive of venereal diseases, alcoholism, vaccinia, and external causes.			
		Admissions.		Deaths.	Noneffective.					
		Total.	Hospital.		Total.	Hospital.	Admissions.	Deaths.	Noneffective.	
January....	5,403	55.90	52.57	0.19	20.99	20.05	44.23	0.19	13.67	Malarial fever, 97; acute bro chitis, 15; constipation, furuncles, 14.
February..	5,296	51.74	47.96	.57	21.20	20.28	39.84	.19	13.92	Malarial fever, 90; constipatic 29; acute bronchitis, 9.
March.....	5,804	67.72	60.31	.17	24.30	22.75	58.06	.17	17.00	Malarial fever, 136; dengue, constipation, 20; acute bro chitis, 16.
April.....	5,762	63.69	58.31	.52	22.29	21.05	55.36	.17	15.61	Malarial fever, 159; acute bro chitis, 17; constipation, febricula, 14.
May.....	5,678	64.11	54.95	.18	20.79	19.18	55.48	.18	15.11	Malarial fever, 156; constipatic 19; acute bronchitis, 13; di rhea and enteritis, 12.
June.....	5,575	65.29	54.17	.72	20.42	18.67	56.86	.72	15.59	Malarial fever, 179; constipatic 30; diarrhea and enteritis, furuncles, 13.
July.....	5,609	56.70	50.28	.53	19.45	18.25	47.07	.53	14.18	Malarial fever, 124; consti tion, 30.
August.....	4,981	59.43	53.00	.20	20.65	19.36	47.18	.20	13.11	Malarial fever, 90; constipatic 20; dengue, 11; furuncles, 10.
September.	5,368	45.46	41.54	.....	17.98	17.11	36.89	.....	12.22	Malarial fever, 77; diarrhea a enteritis, 14; dengue, 13.
October....	5,195	51.78	48.51	.58	19.12	18.08	42.93	.38	13.56	Malarial fever, 92; acute bro chitis, 20; constipation, dengue, 12.
November	5,173	50.07	46.78	.39	17.63	16.95	37.70	.....	12.20	Malarial fever, 62; dengue, constipation, 15; acute bro chitis, 14.
December..	5,044	43.02	39.45	.40	18.27	17.82	35.09	.40	13.07	Malarial fever, 46; acute bro chitis, 14; constipation, 11.
Total.	5,407	678.20	610.32	4.37	20.32	19.18	560.39	.09	14.16	Malarial fever, 1,308; acute bro chitis, 118; constipation, 215

PREVALENCE OF DISEASES, BY RACES, IN THE PHILIPPINES.

In making this comparison it is to be borne in mind that the nati troops were serving in their own country under conditions natural t them, but inimical to American troops.

The admissions and constant noneffective rates were much low for the Philippine than for American troops serving in the Phili

pines. The admission rate for American troops being 1,246.99 and for the Philippine 678.20, while the noneffective rate for the American troops was 44.74 and for Philippine 20.32. The death and discharge rates for the Philippine troops were also lower than for American, the death rate for the former being 4.37, and for the latter 5.42, while the discharge rate for the former was 8.19 and the latter 9.63.

The noneffective, admission, and death rates were all higher for the colored troops serving in the Philippine Islands than for the white, being for the colored 48.10, 1,715.77, and 7.40 per 1,000 and for the white 44.32, 1,189.44, and 5.18 per 1,000. The discharge rate for the white troops was 10.18 per 1,000 and for the colored 5.18.

TABLE NO. 42.—*Important diseases, by races, Philippine Islands, year 1912.*

Diseases.	Admission rates.			Diseases.	Admission rates.		
	White troops.	Colored troops.	Philippine Scouts.		White troops.	Colored troops.	Philippine Scouts.
enereal diseases	215.43	524.06	55.67	Hemorrhoids	7.45	19.24	0.37
alaria	186.35	45.89	241.91	Appendicitis	5.82	4.44	1.66
engue	101.67	168.02	23.12	Articular rheumatism, acute and chronic	5.63	13.32	4.81
iarrhea and enteritis	57.97	82.90	18.86	Conjunctivitis	4.63	8.14	8.69
urunculosis	34.44	45.15	20.90	Tuberculosis	4.36	10.36	5.92
onsilitis (all)	23.90	37.01	3.51	Influenza	2.18	12.58	.37
lcoholism	22.17	13.32	.37	Intestinal parasites	2.00	1.48	6.47
ronchitis, acute and chronic	18.54	48.11	28.30	Pneumonia	1.18	3.70	1.85
ysentery	18.08	7.40	7.03	Typhoid fever	.45	.....	.56
uscular rheumatism	15.08	55.51	5.92	Beriberi	.....	.....	.37
richophytosis	8.00	24.43	8.32				

SANITATION IN THE PHILIPPINE ISLANDS.

The chief surgeon reports that the sanitary condition of the different posts and the accommodation provided for the troops were generally reported to be satisfactory and no outbreak of disease was attributed to unsanitary conditions. As in 1911, however, there was a certain amount of sickness resulting from field service. As has been noted under "typhoid fever," five men from Camp Keithley, Mindanao, were infected with typhoid fever while on duty in the field. At several posts it was noted by the surgeons that a number of men contracted malarial infections while in the field. The troops in the island of Mindanao around Camp Keithley and on the Island of Jolo were in the field a part of the year operating against hostile Moros.

PROXIMITY OF NATIVE TOWNS.

As has been noted before, the proximity of native towns to military posts to a certain extent nullify the sanitary measures instituted in the post. The surgeon, Camp McGrath, says:

> If this post is to be occupied for any length of time it would seem a sanitary necessity for the Government to rent the land immediately behind the officers quarters, the barrios of Viga and Sambat, for to leave these native barrios so close to the post nullifies much of our own sanitation. I am inclined to believe that three cases of entro-colitis, with one death, in officers families, last September were due to infection from these barrios.

On account of the close proximity of the town of Batangas with 30,000 native in habitants, and the barrios of Viga and Sambat 100 yards behind the officers quarter and off the reservation, the question of venereal disease at this post presents many difficulties.

Dengue is endemic in Batangas and the barrios immediately adjoining the post and every new batch of troops furnish new material for infection.

We do the best we can to make the people living in them keep their premises clea by frequent inspections and threats; but as a matter of fact, we have no authority i the barrios, nor do the municipal laws, as I understand them, cover the cases suffi ciently in a sanitary way. The natives maintain horses, cattle, and pigs immediatel around their homes and use open trenches for their own dejecta, conditions allowe by municipal laws; and on account of their poverty must necessarily be allowed Nevertheless these conditions, so close to our own premises, nullify to a great exten our own sanitary measures.

The surgeon, Pettit Barracks, in speaking of antimalarial measures says:

Unfortunately we are in juxtaposition with many native shacks and other breedin places of mosquitoes.

At Augur Barracks the surgeon comments as follows on the anti plague measures adopted:

By the use of rat poison and traps and construction of cement floors in all busine houses in Jolo and its barrios, the number of rats has been greatly decreased. A ships lying at the dock are required to keep rat guards on all mooring lines and watchman on the gangway.

It is apparent that these native barrios cause a great deal o sickness in posts and are a great source of danger where epidemic of severe infectious diseases, such as cholera or plague, occur. It certainly desirable to build all posts away from the vicinity of nativ barrios.

ANTIMALARIAL MEASURES.

Antimalarial measures are being carried on throughout the island The measures are practically the same as those mentioned heretofor that is, drainage and oiling of pools with other general measures fo the prevention or destruction of mosquitos; the enforced use o mosquito nets; and in some cases the use of prophylatic doses o quinine. All infected cases are carefully treated and kept und observation until considered cured. In some few instances effor are being made to screen the barracks and quarters.

FOOD SUPPLY.

Several epidemics of food poisoning occurred at different post These outbreaks were probably due to some bacterial infection the food, although the specific organism was in no case isolated.

The surgeon at Augur Barracks, in speaking of the prevalence amebic dysentery, says:

Most of the cases of dysentery have yielded to the ipecac treatment, but there ha been several cases which have recurred several times. Two liver abscesses, on were found; both were operated on and improvement has been steady in both ca since the operation. The source of dysentery has not been determined, thou everything bearing on the subject has been investigated as far as possible.

All the water is distilled; the public places, such as restaurants, saloons, so fountains, etc., are using boiled water and proper care in washing the glasses. troop messes are using only cooked vegetables, though earlier in the year some radish and lettuce were eaten raw, and these, possibly, were a contributing cause. Th use has been stopped.

The surgeon at Fort William McKinley says:

The old type of ice box, long in use in the Islands, was so unsatisfactory, that new refrigerators of suitable size and design were supplied to all organizations during the latter part of the year.

DISPOSAL OF WASTES.

At all except a few of the posts the system is the same as outlined in the last two reports of this office. At Fort Mills the surgeon states that:

Owing to large number of temporary structures and incomplete sewer system the disposal of wastes is accomplished partly by rock pile incinerators, partly by dry earth closets, and partly by sewer. The work of the incinerators has proven very satisfactory with one exception.

An Imhoff tank, which has been built at Camp Stotsenburg, is reported to be working satisfactorily.

BARRACKS AND QUARTERS.

The new concrete barracks and quarters which have been built at a few posts are, on the whole, quite satisfactory. There are a few minor errors to be corrected.

CLOTHING.

The surgeon at Augur Barracks remarks:

Little complaint is heard as to clothing, aside from that already reported from numerous sources, viz, poor quality of issue clothing, heavy weight, shrinking, bad fit, etc., except as to constant use of leggins by enlisted men. In my opinion many skin lesions of the leg are due to the constant wearing of the leggins.

He seems to voice the sentiment of the entire Medical Corps on this question of the leggins.

ALASKA.

The mean enlisted strength of the troops serving in Alaska during the past year was 1,197 as compared with 1,119 in 1911. This force consisted of Infantry, Signal Corps, and Hospital Corps, all white. Alaska still maintains its position as being by far the healthiest region where the Army is stationed. The noneffective, admission, and discharge rates were all higher in 1912 than in 1911. The death rate was somewhat lower.

The noneffective rate was 16.24 per 1,000 in 1912 as compared with 13.15 in 1911. The rate for disease was 10.96 and for external causes, 5.28 per 1,000. The total rate in the United States was 27.15 per 1,000; that for disease being 22.57, and that for external causes 4.58 per 1,000. The diseases causing the highest noneffective rates were: Venereal diseases, 2.59 per 1,000; measles, 1.07; alcoholism, 0.57; mumps, 0.38, and tuberculosis (all), 0.38.

The admission rate for all causes was 511.28 per 1,000 in 1912 as compared with 418.23 in 1911. The rate for disease was 355.89 per 1,000, and that for external causes 155.39. The corresponding rates for the United States were for total causes 738.70 per 1,000, that for disease being 596.94, and that for external causes 141.76. The diseases having the highest admission rates were: Venereal diseases 41.77; alcoholism, 30.07; measles, 21.72, and bronchitis, 14.20 per 1,000. The rate for discharge on certificates of disability in 1912 was 5.01, and in 1911 4.47. All of the discharges in 1912 were for disease. The corresponding rate in the United States was 14.48 per 1,000, 13.19 being for disease, and 1.29 for external causes.

The death rate in 1912 was 5.85 per 1,000, and in 1911 it was 6.26. In actual number, 7 deaths occurred from disease and three from external causes.

Tables Nos. 3 and 73 on pages 32 and 260, give all the figures for the troops in Alaska for the year 1912.

Sixteen men were invalided home. Five were for tuberculosis. The other 11 were each for a separate cause.

TABLE NO. 43.—*Influence of station, year 1912, Alaska, on officers and enlisted men.*

	Mean strength.	Ratio per 1,000 of mean strength.												Average number of days lost.			
		Admissions to sick report.		Discharged on surgeon's certificate of disability.		Deaths.		Total losses.		Noneffective from sickness.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
		From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.		For each soldier.	For each case.	For each soldier.	For each case.
										Total	In hospital.	Total.	In hospital.				
Fort William H. Seward	362	574.59	317.68	.....	.....	5.52	5.52	5.52	5.52	18.94	16.30	8.60	7.92	6.93	12.06	3.15	9.90
Fort Gibbon	297	461.28	259.26	10.45	10.45	6.73	3.37	17.18	13.82	13.17	11.84	6.55	5.99	4.82	10.45	2.40	9.25
Fort Liscum	200	470.00	290.00	10.58	.....	5.00	.....	15.58	.....	18.10	15.16	10.31	9.28	6.63	14.10	3.78	13.02
Fort St. Michael	167	431.14	221.56	6.29	6.29	5.99	5.99	12.28	12.28	17.62	15.82	7.77	7.05	6.45	14.96	2.84	12.84
Fort Davis	158	645.57	329.11	.....	.....	6.33	.....	6.33	.....	13.11	11.10	5.79	4.87	4.80	7.43	2.12	6.44
Fort Fairbanks	62	64.52	48.39	.....	.....	.....	.....	.....	.....	1.72	1.63	.40	.31	.63	9.75	.15	3.00
Field, etc.	5	1,400.00	1,200.00	.....	.....	.....	.....	.....	.....	13.66	10.93	13.11	10.38	5.00	3.57	4.80	4.00
Total officers and enlisted men	1,251	498.80	278.18	5.01	3.34	5.60	3.20	10.61	6.54	15.65	13.59	7.53	6.81	5.73	11.48	2.76	9.91
Total enlisted men	1,197	511.28	284.04	5.01	3.34	5.85	3.34	10.86	6.68	16.24	14.20	7.80	7.11	5.94	11.62	2.86	10.06

HAWAII.

Only one island of the Hawaiian group is garrisoned, namely, Oahu, on which is situated the city of Honolulu. The mean enlisted strength of the garrison during the year was 3,376 as compared with 2,014 in 1911. In spite of its salubrious and temperate climate and the absence of the more serious epidemic diseases, the noneffective, admission and discharge rates were higher than for the United States. The average number of days' treatment for each case was 13.08 days, as compared with 13.45 for the United States. The death rate was lower.

The constantly noneffective rate was 33.44 per 1,000 in 1912 as compared with 44.52 for 1911. The rate for disease was 26.57, and that for external causes, 6.88 per 1,000, as compared with 36.18 for disease and 8.34 for injuries in 1911. The diseases causing the highest noneffective rates were: Venereal disease 8.69, appendicitis 0.65, influenza 0.62, and diarrhea and enteritis 0.60.

The admission rate in 1912 was 936.32 per 1,000 as compared with 1,080.44 for 1911. The rate for disease in 1912 was 680.69 per 1,000 and for external causes 255.63. That for disease in 1911 was 808.84 and for external causes 271.60. Some of the principal diseases causing the highest admission rates were: Venereal disease 122.93 per 1,000, diarrhea and enteritis 44.14, influenza 38.51, and bronchitis 22.51. A little less than one-third of the total nonefficiency for diseases and a little less than one-fifth of the total number of admissions were caused by venereal diseases.

The rate for discharge for disability was 18.07 per 1,000, 16.29 being for disease and 1.78 for external causes. In 1911 the total rate was 13.90, that for disease being 13.41 and that for external causes being 0.50 per 1,000.

The death rate was 3.85 per 1,000 as compared with 2.98 in 1911. In actual numbers, 13 deaths occurred, 10 being due to external causes and 3 to disease. Three of the deaths from external causes were due to drowning and 3 to traumatisms by machines. Not more than 1 death occurred from any other one cause. In 1912 there were 78 enlisted men invalided home from the Hawaiian Islands. The diseases or conditions causing the highest number of men to be invalided home were: Mental alienation 12, venereal diseases 11, flat foot 7, tuberculosis 6, and enuresis 5.

Tables Nos. 3 and 73, on pages 32 and 260, give figures for troops serving in Hawaii.

TABLE No. 44.—*Influence of station, year 1912, Hawaii, on officers and enlisted men.*

	Mean strength.	Ratio per 1,000 of mean strength.												Average number of days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective rates.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
										From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.					
		From all causes.	Exclusive of injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Exclusive of injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Exclusive of injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Exclusive of injuries, venereal diseases, alcoholism, and vaccinia.	Total	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
Schofield Barracks	2,773	984.85	580.24	17.09	12.53	4.69	0.72	21.78	13.25	22.96	18.71	11.33	9.57	8.40	8.54	4.15	7.15
Fort Shafter	372	857.53	438.17	30.98	28.17	2.69	2.69	33.67	30.86	135.04	131.53	79.20	78.41	49.42	57.64	28.99	66.15
Fort Ruger	236	402.54	237.29	8.85	4.42	4.24	.....	13.09	4.24	2.37	.64	1.10	.37	.87	2.14	.40	1.70
Fort De Russey	168	601.19	380.95	18.52	12.35	.....	.....	18.52	12.35	6.20	3.32	2.94	1.90	2.27	3.77	1.08	2.83
Total officers and enlisted men	3,549	914.62	533.11	18.07	13.63	4.23	1.13	22.30	14.76	32.54	28.61	17.37	15.81	11.91	13.02	6.36	11.92
Total enlisted men	3,376	936.82	542.36	18.07	13.63	3.85	.59	21.92	14.22	33.44	30.01	17.76	16.57	12.24	13.08	6.50	11.98

CHINA.

The mean enlisted strength of the troops, enlisted men, serving in China during 1912 was 1,097. This force consisted of Infantry, and detachments of Signal Corps, Hospital Corps, and noncommissioned staff, all white.

The noneffective rate was 26.01 per 1,000 for all causes, the rate for disease being 23.60, and that for external causes 2.41. The diseases causing the highest noneffective rates were venereal diseases 13.55 per 1,000, rheumatism, articular (all), 0.66, pneumonia (lobar) 0.57, and influenza 0.54.

The admission rate for all causes was 697.36, that for disease being 596.18 and that for external causes 101.19. The diseases causing the highest admission rates were venereal 203.28 per 1,000, influenza 42.84, diarrhea and enteritis 33.73, and alcoholism 22.79.

The discharge rate was 5.47 for all causes. The discharges were all for disease. The death rate was 7.29 per 1,000, the rate for disease being 3.65 and that for external causes being also 3.65.

Tables Nos. 3 and 73, on pages 32 and 260, give all the figures for the troops in China for the year 1912.

PANAMA CANAL ZONE.

The mean enlisted strength of troops, enlisted men, serving in the Panama Canal Zone during the year 1912 was 773. This force consisted of Infantry and detachments of Hospital Corps and noncommissioned staff.

The noneffective rate was 27.74 for all causes, that for disease being 24.30 per 1,000 and for external causes 3.44. The diseases causing the highest noneffective rates were malarial fevers 5.60 per 1,000, venereal diseases 3.16, and tuberculosis (all) 0.90.

The admission rate for all causes was 796.90, that for disease being 641.66 and that for external causes being 155.24. The diseases causing the highest admission rates were malarial fevers 120.31 per 1,000, venereal diseases 68.56, influenza 37.52, and bronchitis 25.87. The rate for discharges on certificate of disability was 15.52, all of the discharges being for disease. The death rate was 9.06 per 1,000, that for disease being 1.29 and that for external causes 7.76. In all there were 7 deaths. Included in this number were 2 homicides and 2 deaths from drowning.

Twenty-five men were invalided home, seven being for flat feet and two each for tuberculosis, mental alienation, and organic disease of the heart, chronic bronchitis, and enuresis. The others were for separate causes.

Tables Nos. 3 and 74, pages 32 and 264, give all the figures for troops serving in the Canal Zone.

PORTO RICO.

There are in Porto Rico two military posts—San Juan at the capital, and Henry Barracks in the interior—both garrisoned by the Porto Rican Regiment. The mean enlisted strength for 1912 was 588. The enlisted strength of this regiment is recruited from native Porto Ricans, the officers being in part Americans and in part Porto Ricans.

TABLE NO. 45.—*Movement of sick in Porto Rico, years 1912 and 1911—Native troops.*

	Years.	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
		Total.	In hospital.	Total.	In hospital.
Ratios per 1,000 of mean strength:					
Admissions to sick report	1912	1,142.86	977.89	921.77	.....
	1911	1,050.00	987.93	770.69	.....
Discharges on certificate of disability	1912	6.80	.....	5.10	.....
	1911	8.62	.....	6.90	.....
Deaths	1912	3.40	.....	.....	.....
	1911	6.90	.....	3.45	.....
Total losses	1912	10.20	.....	5.10	.....
	1911	15.52	.....	10.35	.....
Noneffective	1912	17.47	15.94	10.15	8.99
	1911	29.78	28.55	16.58	15.90
Average number of days lost:					
For each soldier	1912	10.28	9.37	5.97	5.28
	1911	10.87	10.42	6.05	5.80
For each case	1912	8.99	9.59	6.47	.....
	1911	10.35	10.55	7.85	.....

The noneffective rate was much lower in 1912 than in 1911, it being 17.47 per 1,000 in 1912, as compared with 29.78 in 1911. The rate for disease in 1912 was 16.32, and for external causes 1.15. In 1911 the corresponding rates were 28.15 and 1.63. Some of the principal diseases, with noneffective rates, were as follows:

	1911	1912
Venereal diseases	11.47	5.96
Intestinal parasites	2.03	.75
Malarial fevers	1.97	.50
Diarrhea and enteritis	.18	.77
Dysenteries	.44	.64

It is thus apparent that the greatest improvement, and the one accounting for the most of the improvement in the general rate was in the rate for venereal diseases. Both the intestinal parasites and malarial fevers also showed a marked improvement.

The admission rate was higher in 1912 than in 1911, being 1,142.86 per 1,000, as compared with 1,050.00 for 1911. The rate for disease was 1,037.41 per 1,000, and that for external causes 105.44 in 1912, and in 1911 the rate for disease was 968.97 and for external causes 81.03. In June, when the bubonic plague was reported in San Juan, upon the

recommendation of the post surgeon, daily examinations were made of all the enlisted men in the post for several weeks. This resulted in 74 men being admitted to the hospital for several days observation in June, 10 in July, and 5 in August. In Table No. 76 seventy-seven of these cases are tabulated as under observation, and 12 as hypertrophied inguinal glands. If these 89 cases are deducted from the admission rate for disease, as they should be, this rate would be reduced by 151.36 per 1,000, making it 886.05, or lower than the corresponding rate in 1911. The total rate would then be 991.50 per 1,000, as compared with 1,050.00 for 1911.

The following list shows the principal diseases, with rates for 1911 and 1912:

	1911	1912
Venereal diseases	191.38	105.44
Malarial fevers	131.03	52.72
Dysenteries	18.97	34.01
Diarrhea and enteritis	12.07	112.24
Rheumatism, articular (all)	3.45	11.90
Febricula and undetermined fevers	1.72	13.61

It will thus be seen that the rate for venereal diseases showed a very marked improvement. The improvement in the rate for malarial fevers was also marked.

TABLE No. 46.—*Diseases of native Porto Rican troops, admission rates per 1,000 of mean strength.*

	1912	1911	1910	1909	1908
Venereal diseases	105.44	191.38	162.44	250.44	242.91
Chancroid and results	57.82	101.72	55.84	89.95	60.28
Gonorrhea and results	30.61	60.34	74.45	126.98	143.62
Syphilis and results	17.01	29.31	32.15	33.51	39.01
Furuncle	66.33	44.83	57.53	109.35	78.01
Malaria	52.72	131.03	74.45	179.89	219.86
Dysenteria	34.01	18.97	22.00	14.11	15.96
Influenza	13.60	46.55	23.69	82.89	83.33
Rheumatism, acute articular	11.90	3.45	1.69	8.82	5.32
Bronchitis, acute and chronic	10.20	15.52	20.30	29.98	19.50
Tuberculosis	3.40	1.72	1.69	3.53	1.77
Filariasis	1.70	20.69	28.76	22.93	3.55
Smallpox	1.70	6.90	1.69	3.53	7.09
Typhoid fever	.....	1.72	5.08	5.29	5.32
Ankylostomiasis	.....	96.55	76.14	8.82	14.18
Measles	.....	.....	1.69	17.64	19.50

The rate for discharge for disability was 6.80 per 1,000, all cases being for disease. In 1911 the rate was 8.62 per 1,000, that for disease being 6.90 per 1,000, and for external causes 1.72. The death rate was 3.40 per 1,000. The actual number of deaths were 2. Both were due to external causes, traumatic in character. In 1911 there were 2 deaths caused by disease and 2 by external causes.

The principal point of sanitary interest during the year was the occurrence of bubonic plague in San Juan and some other points in Porto Rico during the summer of 1912. Prompt and efficient measures were adopted to protect the garrison at San Juan and no case occurred. Mention of the work done by Lieut. Col. J. R. Kean, Maj. F. F. Russell, and First Lieut. F. H. Foucar, Medical Corps, during the early part of this epidemic, is made under the heading of "Special work by medical officers," page 177.

BOARD FOR THE STUDY OF TROPICAL DISEASES.

During the year 1912 this board was composed of Maj. Percy M. Ashburn, Capt. E. B. Vedder, and Lieut. Ernest R. Gentry. Maj. Weston P. Chamberlain and Maj. Horace D. Bloombergh were relieved by Maj. Ashburn and Lieut. Gentry in January, 1912.

A second story was built over a portion of the quarters of the Hospital Corps detachment for the occupancy and use of the board. This work was completed about August 31, 1912. The board is thus provided with far better and more commodious quarters.

EFFECTS OF TROPICAL SERVICE.

In reply to a letter from the commanding general of the Department of the Philippines, March 15, 1912, asking for the opinion of the board in regard to the effects of continued tropical service, and relative to the character of residence best suited to conserve the health of the occupant, the board stated—

1. The effects of a tropical climate, if harmful, are probably cumulative to a certain extent, i. e., increase with length of exposure.

2. Aron (Phil. Journ. of Science, April, 1911) has shown that tropical sunlight is harmful by virtue of its heat rays; monkeys and rabbits, for instance, being killed by exposure to sun for an hour or two, even in December and January, but being protected from harm by either shade or an electric fan or breeze to promote heat dissipation.

3. Aron and many others show, in fact there is practical unanimity in the opinion, that humidity greatly increases and aggravates the harmful effects of heat by decreasing evaporation.

4. The climate of the Philippines is both hot and humid and is considered by most Americans a cause of discomfort.

5. Hot and muggy weather in the United States and most parts of the world is recognized as a proper justification for lessening or stopping work—witness the general closing of schools in summer, the general taking of vacations then, the earlier closing of stores, etc.

6. It is there and elsewhere a matter of common observation that "heat waves" do increasing harm as they last longer; that they are tolerable if a breeze comes up daily (as at the seashore) or if the nights are cool. Mortality rates increase progressively during such periods of excessive heat.

7. It is a matter of official recognition that Government employees need to get away from the heat of Manila each year; hence the removal to Baguio.

8. It is likewise commonly recognized that many women and children become so run down and debilitated as to need to go to Japan, Baguio, or the United States.

9. It is often true that monotony and discomfort are the causes of nervous and mental breakdown—witness the often-mentioned insanity among farmers' wives and the nervous breakdowns attributable to

pain and strain, even though it be, as in many cases of eyestrain, so slight as not to be recognized by the patient.

The board concludes that—

It becomes apparent that an endeavor should be made to provide quarters as cool as possible. The health of officers and men will undoubtedly suffer if they are compelled to live in hot quarters.

The ideal of the majority of tropical sanitarians with regard to housing is a detached house of the bungalow type, having wide verandas, and with all the rooms communicating with the outside. Giles says: "The second great desideratum of a tropical house is free ventilation, to secure which at least one, and preferably two sides of each room should be in free communication with the outer air by means of doors or windows and some of these extend to the floor level or near it."

This arrangement secures protection from the heat and the best possible ventilation, and it is evident that it is desirable to approach this ideal as closely as possible, while types of construction in which part of the rooms will be hot and illy ventilated should be condemned. In quarters so constructed the resultant discomfort and injury will vary with the increased heat. A man can remain in the Tropics indefinitely without being actually sick if infectious diseases are avoided.

This is fast leading to the fallacy that we can advantageously remain many years in these latitudes. The fact that while a man may never be sick he yet may have his physical and mental vigor greatly impaired by prolonged exposure to heat is thus lost sight of. No man can do his best work, either physical or mental, if he is hot and uncomfortable. The same feeling of lassitude and indisposition to exertion is experienced at home during the hot summer, which after a few years becomes chronic.

If troops are to remain in this climate, it will be desirable that they should live under the most favorable circumstances, and especially that they should have cool quarters. It is believed to be a fact that if the Army is hot and uncomfortable in the Tropics the end results may be inferior even from a financial standpoint. Sick leave and ordinary leave will increase and general efficiency will be impaired.

MOUNTAIN DIARRHEA.

In accordance with the direction of the commanding officer, Philippine Department, of April 20, 1912, the board made an examination and report on the sanitary conditions of Camp John Hay, Benguet, Philippine Islands. An examination of the sick report for 1910, 1911, and the first part of 1912 showed that the only disease that could be said to be at all prevalent was an acute intestinal trouble, usually referred to as "mountain diarrhea." This disease is characterized by diarrhea, with mucus and blood in the stools, and by slight fever. It is usually mild in soldiers and lasts from two days to a week. A small epidemic of this disease occurred during the early part of the year.

On January 17, 1912, Private H., of Company E, was taken sick with diarrhea, fever, and abdominal pain. He went to hospital on the 19th and returned to duty on the 20th. On the 22d he was put on kitchen police, where of course he associated with the cook. On February 1, 10 days later, Cook J. had diarrhea and fever and passed blood and mucus in his stools. He did not go on sick report. From February 9 to 16 9 other men of Company E, all of whom ate in the company and partook of the food prepared by J., developed the same trouble, diarrhea, with bloody, mucus stools and fever. One of these men, Private W., was on kitchen police while suffering from his diarrhea. Other cases may have developed later in February, but if so they were so mild that the men did not go on sick report, for the next admission to hospital for this trouble was that of Private A., on March 6, and the next, that of Private F., who began to mess with E Company on March 1, was taken sick with fever and bloody mucus stools on March 12 and entered hospital on March 21.

We have an epidemic of disease characterized by fever, abdominal pain, diarrhea, and blood and mucus in the stools, limited to the men of one company and one mess. All of the cases were very mild and the average duration of them was six days. Despite their mildness and brief duration, it seemed certain that the disease was infectious, that the infection was disseminated in the company and through food, and probably that it was bacillary dysentery.

The only promising method of investigation as to the specific nature of the trouble several months after the epidemic was to test the agglutinating power of the blood on dysentery bacilli.[1] For this purpose we had two strains, Flexner and Shiga, and using them we obtained positive agglutinations of the Flexner bacillus with the blood of all cases in dilution of 1 to 20, and with the blood of all but three in dilutions of 1 to 50. Control tests made with the blood of five men who had not had diarrhea gave negative results in four instances and a positive in 1 to 20 dilution in one instance.

During the study by the board in April and May there were two cases. From one of these cases the bacilli of bacillary dysentery of the Flexner type were isolated. From a study of the epidemiology of the disease and its prevalence in natives, from its analogy to similar diseases in other parts of the world, from the proved presence of bacillary dysentery in Baguio, as shown by the work of Dr. Barker, of the Bureau of Science, and from the study of the epidemic referred to above, the board concluded that the "mountain diarrhea" is bacillary dysentery, usually mild, but occasionally fatal. It is apt to be severe in children and is often or usually due to infection with the Flexner type of bacillus.

SMALLPOX AND VACCINIA.

Some work has been undertaken bearing on the relationship of smallpox and vaccinia. The board states that—

Apparently that relationship presents a dilemma and an effort at explanation involves the choice of one of the alternatives. It would appear either:

1. That the germ of smallpox by passage through bovines and some other animals loses those qualities by virtue of which it causes a generalized, highly contagious disease of large mortality, and is only able thereafter to cause a localized, harmless, inoculable, and non-contagious disease, that it never regains its former qualities by years or a century of passages through its original and proper host, and that it therefore presents the most striking instance of hereditary transmission of acquired characteristics (though we have not seen it cited as such); or

2. That smallpox is caused by a double virus, one part of which can not long survive in bovines (four generations) while the other survives and becomes exalted, constituting vaccine. Vaccine inoculated into human beings protects against smallpox by inducing immunity to one of the two essential parts of its causative virus.

A great deal of difficulty was experienced in finding cases of smallpox in Manila from which material could be obtained to conduct experiments. Both the director of health and the physician in charge of San Lazaro Hospital had several times spoken to the board of a disease resembling varioloid that appears in Manila with a certain amount of regularity during each hot season, and had expressed their uncertainty as to its nature. As a precautionary public-health measure these cases have been classified as modified smallpox and isolated as such. The board, being particularly anxious to obtain access to cases of smallpox for the purpose of making experimental inoculations in monkeys, saw a number of these cases, all of which have shown great similarity. The records show that there have been

[1] This test depends on the observed fact that the blood serum of persons recovering from one of certain infectious diseases, such as bacillary dysentery or typhoid, will, if diluted and added to suspensions or cultures of the specific germs causing the disease, cause them to come together in clumps. The blood of persons who have not had the disease rarely does so.

ately about 500 cases of "varioloid" in Manila per year, and that there has been no mortality due to the disease. Attempts to infect seven monkeys by inoculation with fresh vesicle contents were uniformly unsuccessful. Had the disease been smallpox most of the monkeys should have shown successful inoculations. The board is of the opinion that the disease in question is not smallpox or varioloid, and that it is in all probability chicken pox and that smallpox except for an occasional imported case is nonexistent in Manila. If this opinion is correct, the facts signify a notable achievement in preventive medicine and it is unfortunate that the records do not show it. Some experiments were conducted with material obtained from two imported cases of smallpox. The following is a summary of the results:

1. Fresh vesicle contents from a case of human variola is capable when inoculated into abrasions or scarifications on nonvaccinated monkeys, of producing *variola inoculata* in those monkeys, the disease being marked by fever and by primary and secondary lesions.

2. Such vesicle contents kept at ice-chest temperature for 23 days loses most of its virulence, but may still, in a proportion of instances, produce a mild and atypical *variola inoculata*, which in turn and in further modified form may be passed to other monkeys.

3. Active and fresh vesicle contents inoculated on vaccinated monkeys may produce a fever closely resembling that of *variola inoculata* in the monkey and a condition permitting of interpretation as *variola sine exanthemate* in the monkey.

4. Smallpox scabs or disks from man or monkey possess but a low degree of virulence, or very quickly lose their virulence.

5. When inoculation of such scabs does result in the production of infection this may be manifested only locally at the site of inoculation. In other words the "B" part of smallpox virus survives longest in scabs.

We admit that this small series of experiments affords but little proof of the correctness of our hypothesis as to the relationship of variola and vaccinia. We feel justified in restating our hypothesis that smallpox is due to a dual and divisible virus, one part of which is the cause of vaccinia and the pock stage of smallpox, the other part being the necessary for the production of the highly contagious, febrile, general disease with an initial stage and preliminary rashes.

HEMOGLOBINURIC FEVER.

On examining the blood of a case of hemoglobinuric fever a number of spirilli, resembling the spirochætæ of relapsing fever were found. The blood of several other patients with this disease has been examined and all found negative for spirilli.

The board is of the opinion that there are four possibilities.

1 (least probable). That the occurrence of the spirillum in this blood is without significance or is a contamination.

2. That it has a relationship to black-water fever.

3. That it causes a hitherto unknown variety of relapsing fever.

4 (most probable). That the case was one of Indian relapsing fever, a disease not hitherto recognized or reported in these islands so far as is known.

BERIBERI AND POLYNEURITIS.

Capt. Vedder has continued his work on these subjects and summarizes the later results as follows:

The work on beriberi has been continued, and some important results have been obtained. We have found that undermilled rice that has been stored for more than a year, and which was moldy and quite unfit for human consumption, would still prevent fowls from developing polyneuritis gallinarum. This experiment shows conclusively that an undermilled rice does not necessarily lose its protective power because of dampness or long storage, as has been claimed by some.

We have succeeded in confirming Funk's (2) discovery of a base existing in rice polishings which promptly cures fowls suffering from polyneuritis gallinarum. We have also found that this base is not the only protective substance contained in rice polishings.

We have succeeded in protecting fowls by two other groups of substances.

Most of the more recent investigators have abandoned feeding experiments because they are so tedious and time consuming, and have relied upon curative experiments. It is now evident that both methods must be used in conjunction in order to obtain all the facts.

We have also treated with the extract which had previously proved so successful in curing infantile beriberi a case of pernicious cardiac beriberi in an adult. The results in this case were quite as gratifying and resulted in prompt relief of the cardiac disturbance. Cases of chronic dry or paralytic beriberi, however, seem to be only very slowly improved by the use of this extract.

SPRUE AND FILARIASIS.

Some work has been done on these two subjects, but owing to the lack of patients with these diseases, very little has so far been accomplished.

TRANSPORTS.

SANITARY CONDITION.

The sanitary condition of the various transports and the accommodation provided for troops on them has been in the main satisfactory, and the majority of the sanitary faults which have existed or have arisen from time to time have been corrected. The sanitary inspector of the Department of the Philippines reported that from a sanitary point of view there were several serious structural defects on the transport *Dix*. The hospital, butcher shop, bakery, and the doors of the meat and vegetable storeroom are all badly located, being placed on the same deck with the live stock, and in such close proximity to the stalls as to be constantly in danger of contamination from the dirt and sweepings from this source. The butcher shop is in a confined space with no ventilation and is foul with odors from the stock stalls. In this space are the doors of the meat and vegetable storage rooms and the commissary storeroom. The hospital is too small, and it is without bathing or toilet facilities. He recommends as follows:

(1) That proper hospital accommodations be provided, consisting of a ward of four beds, the necessary toilet and bathroom facilities, and sleeping quarters for the Hospital Corps' personnel of two men. There should be one compartment for contagious cases, with space for two beds.

(2) The quarters for the transport surgeon should be increased in size, with an additional room for an office.

(3) Additional shower baths, water-closets, and urinals for both officers and crew should be installed, and proper messing facilities for the crew provided.

(4) Provision should be made for placing on the upper deck, away from the stock stalls, the following: (*a*) All mess rooms; (*b*) all sleeping rooms for the ship's officers; (*c*) bakery, butcher shop, and storerooms; (*d*) hospital.

One case of smallpox and three cases of varioloid, all Philippine waiters, occurred on the *Sherman* in April, 1912, and one case of varioloid (a coal passer) on the *Thomas*, also in April, 1912.

The surgeon on the *Thomas* in August recommended:

That a small wire cage be built adjoining the insane ward on the hospital deck aft, so that insane patients can stand up and walk around during transportation to the United States. There are 8 square yards of floor space in the aisles in the detention ward which does not give patients enough room to exercise and keep in good condition. They are consequently constipated and hard to manage.

This recommendation received the approval of the higher authorities, and the chief of the Quartermaster's Corps directed that a knock-down wire inclosure be constructed.

The surgeon on the *Logan*, in May, 1912, reported that:

It is customary for the Army and Navy to render reports to the transport surgeon relative to the contagious diseases at the stations from which they report. None were received from Bremerton or Chicago training station (Navy).

The sailors and marines were highly infected, and measles and mumps broke out almost as soon as we set sail. Everything was done to check the contagion, including isolation and daily examinations, but we had 18 cases of measles and 22 cases of mumps; of the former only 2 were from the Army, and they, no doubt, contracted it from the sailors and marines.

This matter was referred to the Navy Department for action. In the same report the surgeon recommended that the roller towels used in the first-cabin toilets should be replaced by hand towels.

The general superintendent of the transport service ordered 100 rolls of paper towels for this purpose. These have been used in several of the large hospitals, and have proven to be very satisfactory. They will, no doubt, be especially satisfactory on the transports for the required use.

In the last annual report of this office there was some discussion relative to the quarantining in Manila of transports on account of the occurrence of cases of measles on board. The commanding general, Department of Philippines, directed the tropical board to make a full investigation and report of the occurrence and mortality of measles in Manila. The board closed an exhaustive report as follows:

Summarizing all of the preceding we may say that measles exists in these islands that it is a contagious disease which in the past year has prevailed extensively and dangerously; that it has long existed here and has usually been mild in type; that it has lately shown a higher mortality, which in Manila approximates that of other countries; that the disease has been repeatedly introduced on transports, but we are unable to find evidence that the cases so introduced were unusually virulent; that its spread on and from transports seems well controlled at least as relates to troops; that it may be and almost certainly is imported at times from Hongkong, Japan, and other places; that its spread and possibly its increased severity (whether due to old or recently introduced strains) is likely traceable to schools and increased domestic travel; that no adequate precautions, if any, have been taken during 1911 and 1912 to prevent such spread by schools; that its virus quickly dies outside the body; that transmission by fomites is not disproven, but in view of the known instability of the virus we think that it probably can not occur after more than a few days; that it is impracticable to prevent the occurrence of measles on transports.

Consequently: (A) We believe that the following measures would be most effective in limiting the introduction of measles by transports and its spread from them:

(1) The military authorities continue to exercise all the care heretofore exercised to prevent the spread of the disease.

(2) That in the fullness of precaution each infected man's locker and his clothing in use be disinfected on the transport as soon as the diagnosis is made.

(3) That all personnel infected be sent to hospitals and suspects be kept under observation of medical officers in hospital if necessary if belonging or attached to the military service, while civilians infected or exposed be notified to the bureau of health and placed under its control.

(4) That heavily infected or recently generally exposed commands be quarantined in detention camps on shore.

GENERAL HOSPITALS.

LETTERMAN GENERAL HOSPITAL, SAN FRANCISCO, CAL.

This hospital is used as a base hospital for the Philippines and Hawaii; a post hospital for the Presidio, San Francisco, Fort Winfield Scott, and several smaller posts in the harbor of San Francisco, and a general hospital for the western part of the country. It is the largest general hospital in the Army.

During the year a new officers' ward, isolation ward, and kitchen were completed and occupied. The remodeling of all the toilet rooms and diet kitchen has been completed. The roads, walks, and grounds have been improved. The commanding officer states that plans have been drawn and approved for a hydrotherapeutic building, a nurses' dormitory, and an addition to the detention ward, all of reinforced concrete construction. He recommends that no further construction of wood be done, but that the older wooden buildings be gradually replaced by reinforced concrete.

Excellent professional work has been done in all departments, and the field of usefulness of the hospital has been materially extended during the year. Only one case of typhoid fever was treated during the year, a recently discharged soldier from Alaska, who had not received the typhoid prophylactic. The work of the disability board, while requiring a great deal of time and care, has been a decided advantage.

The number of patients admitted during the year, including civilians and general prisoners, was 3,017, this being an increase of 45 over the preceding year. There were 231 cases remaining in hospital December 31, 1911, making a grand total of 3,248 patients treated in this hospital during the year. Some of these patients were treated for more than one cause, and in the hospital tabulation more than one case was counted for such patients. The total cases treated were 3,435. Of this number of cases 106 were officers, 2,709 enlisted men, 599 civilians, and 21 general prisoners. There were 1,600 medical cases, 1,155 surgical, 533 venereal, and 147 mental. The daily average number of patients was 255.5. Of this number 11.1 were officers, 215.3 enlisted men, 27.4 civilians, and 1.6 general prisoners. The average number of days in hospital for each case was as follows:

	Officers.	Enlisted men.	General prisoners.	Civilians.	
				Male.	Female.
Medical	44.72	24.27	10.50	16.40	12.28
Surgical	29.27	30.02	36.8	23.16	14.45
Venereal	18.67	31.27	36.8	18.95	7.00
Mental	84.00	76.10	51.83	44.00	19.00

The following tables show the movement of the sick, together with the principal causes of admission, during the calendar year of 1912, civilians and general prisoners being included:

	Officers and enlisted men.	General prisoners.	Civilians.
Remaining in hospital Dec. 31, 1911	201	2	28
Admissions:			
Admitted from command	143	1	32
Admitted by transfer	2,272	18	44
Otherwise	46	0	461
Total to be accounted for	2,662	21	565
Dispositions:			
Returned to duty	1,916	13	26
Died	31	0	29
Discharged on certificate of disability	322	0	0
Discharged expiration term	27	2	0
Transferred to Government Hospital for Insane	32	1	0
Transferred to Army and Navy Hospital, Hot Springs	5	0	0
Transferred to general hospital, Fort Bayard	60	0	2
Transferred to other hospitals	15	0	0
Otherwise disposed of	37	1	483
Total dispositions for the year	2,445	17	540
Remaining in hospital Dec. 31, 1912	217	4	25

Admissions (with cause).	States.	Islands.	Total.
For gunshot wounds	20	1	21
Diarrhea	18	6	24
Malaria	47	0	47
Typhoid	1	0	1
Rheumatic affections	74	2	76
Venereal	454	40	494
Injuries	327	15	342
Insanity	44	51	95
Alcoholism	59	0	59
All others	1,675	183	1,858
Total	2,719	298	3,017

There were 60 deaths during the year, the causes being as follows:

Diseases of the nervous system	3
Diseases of the circulatory system	7
Diseases of the respiratory system	5
Diseases of the digestive system	7
Tuberculosis	9
Nephritis	4
Carcinoma	8
Marasmus	1
Suicides	4
Poisoning and trauma	5
Died, not on sick report	7
	60

Of the patients dying, 31 were officers and enlisted men, and 29 were civilians.

There were 322 discharged on certificate of disability. Of this number 233 were not in line of duty, and 89 in line of duty.

The causes were as follows:

General diseases	82
Diseases of the nervous system and organs of special sense	117
Diseases of the circulatory system	20
Diseases of the digestive system	7
Diseases of the genito-urinary system (nonvenereal)	5
Diseases of the bones and organs of locomotion	45
Condition due to external causes or violence	34
Other causes	12

The largest number of discharges for any one cause was 25, for "flat foot," and 25 for constitutional psychopathic state. There were 20 for defective mental development; 18 for gonorrheal urethritis; 15 for chronic alcoholism; and 13 for syphilis.

The following is a statement of the admissions and dispositions of insane patients during the year:

	Officers.	Enlisted.	Civilians.	General prisoners.
Remaining Dec. 31, 1911		20		2
Admitted	1	118	7	2
Total to be accounted for	1	138	7	4
Transferred to Government Hospital for Insane	1	31		1
Discharged on certificate of disability		72		
Sent to recruiting offices for disposition		13		
Returned to duty, left hospital, etc		8	5	1
Died			1	
Total dispositions	1	124	6	2
Remaining in hospital Dec. 31, 1912		14	1	2

An active surgical clinic is maintained at this hospital, the following being a condensed tabular statement of the surgical operations:

Operations.	Officers.	Enlisted men.	Total.	Retired officers.	Retired enlisted.	Accepted recruits.	General prisoners.	Civilians.	Grand total.
Cranium	0	1	1	0	0	0	0	1	2
Eye	1	5	6	0	0	0	0	2	8
Ear	1	1	2	0	0	0	0	0	2
Nose	1	10	11	0	0	0	0	31	42
Throat	2	35	37	0	1	0	0	47	85
Face	1	6	7	0	0	0	0	4	11
Neck	4	8	12	1	0	0	0	0	13
Upper extremity	0	17	17	0	3	0	0	4	24
Thorax	0	5	5	0	0	0	0	3	8
Abdomen (laparotomy)	14	115	129	4	1	1	0	75	210
Gynecological:									
External								106	106
Internal								79	79
Lower extremity	7	59	66	0	0	0	1	23	90
Major (not included)	1	10	11	1	0	0	0	9	21
Minor (not included)	2	92	94	1	3	0	0	18	116
Total	34	364	398	7	8	1	1	402	817

Included in this list are 139 operations for appendicitis, 48 for hernia, 28 for hemorrhoids, and 61 for endometritis. In the gynecological department 51 women were delivered at term, and there was one stillbirth. There were 15 incomplete abortions rendered complete.

Of the operations performed, one was reported as partially successful, four as failures, and three were followed by death. The cases in which deaths occurred were gunshot wounds of the neck, hypertrophied prostate, and intestinal obstruction, with gangrene.

The following is a statement of the work done in the eye, ear, nose, and throat clinic:

	Hospital cases.	Out cases.
Officers and enlisted men	399	295
Families of officers and enlisted men	37	171
Civil War veterans	3	3
Civilian employees	11	28
Families of civilian employees	0	11
Nurses	3	0
Examinations: Army nurses	0	25
Total	453	533

A large department laboratory is maintained for the use of the hospital, and for the special work of the posts on the Pacific coast. The report of the work done will be found under the general heading of "Laboratories," page 157.

The mean strength of the personnel on duty at this hospital for the year was: Officers 13, Army Nurse Corps 39, Hospital Corps 158, post noncommissioned staff 2, and Signal Corps 1.

There were 27 civilians employed by the Medical Department and 14 by the Quartermasters Corps on duty in the hospital during the year.

WALTER REED GENERAL HOSPITAL.

This is the general hospital at Washington, D. C., and also serves as post hospital for Washington Barracks, D. C., an auto ambulance conveying the patients from the post at sick call and answering emergency calls. Since the last annual report, a kitchen and mess room for the hospital proper has been completed and an addition has been made to the nurses' quarters, which will now accommodate 24 nurses in a suitable way. Work is being pushed on the isolation hospital, which will be completed in a short time. When the barrack building was vacated by Field Hospital No. 3, October 21, 1912, it was immediately occupied by the Hospital Corps detachment on duty at this hospital. This building is a substantial and well-built structure and very suitable for its purpose. A part of the basement has been altered for the purpose of establishing a post exchange. This gives the men the benefit of this much needed institution. The quartermaster has a seeding and planting program whereby the appearance of the grounds will be improved from year to year as funds become available. There are only two sets of officers' quarters. The commanding officer is of the opinion that the Government would be far better and more economically served by building quarters for all officers on duty there.

The number of cases admitted during the year, including retired officers, retired and discharged enlisted men, and civilians, was 867, this being an increase of 122 over the preceding year. Of this number, 104 were officers, 411 enlisted men, 19 retired officers, 23 retired and

discharged enlisted men, 120 civilians, 2 general prisoners, and 8 members of the Army Nurse Corps. Three hundred and ninety of these case were medical and 297 surgical. There were 52 cases remaining on sick report December 31, 1911, making a total of 739 treated during the year. The daily average number of patients was as follows: Officers, 12.34; enlisted men, 35.54; retired officers, 0.863; retired and discharged soldiers, 1.65; Army Nurse Corps, 0.30; civilians, 5.615; and general prisoners, 0.05. Total, 56.358.

The following table shows the movement of the sick, together with the principal causes of admission, during the calendar year 1912, civilians being included:

Remaining on sick report, Dec. 31, 1911	52
Admissions:	
For gunshot wounds	2
For diarrhea and dysentery	10
For malarial fevers	31
For typhoid fever	4
For rheumatic affections	14
For venereal diseases	58
For injuries	95
For insanity	18
For alcoholism	11
For all other causes	444
Total admissions during the year	687
Total admissions to be accounted for	739
Dispositions:	
Total returned to duty	389
Discharged for disability	46
Discharged per expiration of term	6
Deaths from all causes	18
Deserted	2
Transferred to other general hospitals	30
Otherwise disposed of	184
Total dispositions during the year	675
Remaining on sick report Dec. 31, 1912	64

There were 18 deaths. Of this number, 3 were officers, 8 enlisted men, 2 retired officers, 2 retired soldiers, and 3 civilians. The following were the causes of the deaths:

Cerebral concussion	1	Chronic nephritis	2
Typhoid fever	1	Sarcoma	1
Sprue	1	Chronic amoebic dysentery	1
Pyemic liver abscess	1	Apoplexy	1
Appendicitis	1	Atrophic cirrhosis	1
Fracture cervical vertebra	1	Chronic interstitial pneumonia	1
Pernicious anemia	2	Fracture, left hip	1
Mitral insufficiency	2		

There were 46 men discharged on certificate of disability. The causes were:

Flat foot	10	Chronic endocarditis	2
Psychosis	5	Arthritis, chronic	2
Nocturnal enuresis	3	Result fracture	2
Chronic amoebic dysentery	2	Others	20

An active surgical clinic is maintained at this hospital. The following is a statement of surgical conditions for which operations were performed.

Hernia	25	Diseases of the ear	1
Appendicitis	43	Diseases of the nose	24
Carcinoma, general, abdominal	1	Diseases of the throat and pharynx	124
Cholecystitis	1	Diseases of the neck and thorax	3
Cholelithiasis	1	Other diseases of the genito-urinary system, not specified above	8
Intestinal obstruction	3	Diseases of the vascular system	1
Abscess left iliac fossa	1	Diseases of the skin and cellular tissue not specified above	8
Duodenal ulcer	1	Disease of bones	6
Exploratory laparatomy	1	Diseases of joint, not specified above	4
Hemorrhoids	10	Other diseases, general	5
Fistula in ano	3	Gynecological:	
Epithelioma of scalp	2	Retroversion of uterus	6
Phimosis	10	Cystic ovary	4
Varicocele	5	Lacerated perineum	5
Adenitis	12	Endometritis	9
Fibrous ankylosis joint	11	Carcinoma	1
Bad result fractures	4	Other gynecological	6
Amputations	5		
Diseases of the eye	3		

Two operations which were performed during the last few months by Lieut. T. J. Leary are considered worthy of special mention. These operations were the removal of the gall bladder in two cases of chronic typhoid carriers. One case was that of First Class Pvt. M. M., Engineer Corps, mentioned on page 47 of Annual Report of the Surgeon General for 1911. This man had been under observation since September 5, 1910, and during all this period had been a constant typhoid carrier. The other case had a cholecystostomy done several months before. A permanent fistula had formed with typhoid bacilli present at all times in discharge, as well as in the feces. After operation the typhoid bacilli disappeared from the urine and feces in both cases. These cases will be carefully followed up to determine the permanent result.

The following is a tabular statement of the work done in the laboratory during the year:

Examinations of—	
Urine	5,059
Blood	831
Feces	865
Sputa	916
	7,671

The average number of medical officers on duty during the year was 7, enlisted men 70, and Army Nurse Corps 18.

GENERAL HOSPITAL, FORT BAYARD, N. MEX.

This hospital is for the treatment of cases of pulmonary tuberculosis in the Army. Fort Bayard is situated in the southwestern part of New Mexico, the reservation originally extended about 4 miles north and south and 3 miles east and west and had an area of approximately 13½ square miles. Several years ago it was enlarged by the purchase of land to the north and by the addition, through Executive order, of various tracts of public land, the object of the enlargement being the more perfect protection of the watershed and the acquisi-

tion of additional water. On the north the land rises rapidly, reaching the height of 9,000 feet at Black Peak, about 8 miles from the post. In this direction the surface is broken by rocky hills covered with piñon, juniper, and western yellow-pine trees. The country is picturesque, and fine views are to be had from the hills. To the south the valleys widen into vast treeless plains. The feature which constitutes the peculiar excellence of the climate of Fort Bayard and distinguishes it from other parts of the Rocky Mountain Plateau is its relative equability. The climate is such that outdoor life is pleasant throughout the year. Two factors contribute to secure this result—the altitude and the geographical position. The altitude, 6,165 feet, prevents excessive heat; the hot plains of a lower elevation which surround on all sides the mountainous region in which Fort Bayard is situated temper the cold winds of winter and prevent excessive cold.

No new buildings were constructed during the year. A silo at the dairy was erected at the expense of the hospital fund. An additional well was dug and provided with an electrically operated pump. A small concrete dam was constructed upon Cameron Creek at a point about half a mile below the post. The water thus collected has been brought upon the lands below the dam, thus rendering possible the irrigation of about 10 acres of excellent land hitherto unavailable for profitable cultivation.

The commanding officer states that the increased number of beneficiaries of the Soldiers' Home under treatment at this hospital has resulted in overcrowding the wards for ambulant patients, so that it has been necessary to quarter some of the patients in the old wooden barrack known as ward 5, which is quite unsuited for the purpose. The number admitted during the year, including beneficiaries of the Soldiers' Home, civilians, and general prisoners, was 686, this being an increase of 62 over the preceding year. There were 242 patients remaining December 31, 1912, making a total of 928 cases treated during the year. Of this number 29 were officers, 361 enlisted men, 463 beneficiaries of the Soldiers' Home, and 75 civilians. Of the number treated, 888 were medical cases and 40 were surgical. The daily average of officers was 12.63, enlisted men, 79.61; beneficiaries of the Soldiers' Home, 139.95; civilians, 13.79; total, 245.97.

The following tables show the movement of the sick during the year, with the principal causes of admission and disposition.

	Officers, enlisted men, and civilians.	Beneficiaries of the Soldiers' Home.	Total.
ADMISSIONS.			
For tuberculosis	245	304	549
For injuries	22	.....	22
For enterocolitis	1	.....	1
For leukemia	2	.....	2
For emphysema, hypertropic	1	.....	1
For rheumatism	6	.....	6
For appendicitis	4	.....	4
For gunshot wound	2	.....	2
For venereal diseases	21	.....	21
For sapremia following childbirth	1	.....	1
For alcoholism	7	.....	7

	Officers, enlisted men, and civilians.	Beneficiaries of the Soldiers' Home.	Total.
ADMISSIONS—continued.			
For pneumonia	2		2
For dysentery	1		1
For other causes	67		67
Total admissions in 1912	382	304	686
Remaining Dec. 31, 1911	83	159	242
Total to be accounted for	465	463	928
DISPOSITIONS.			
Returned to duty	154		154
Died	24	32	56
Discharged for disability	85		85
Deserted	1		1
Discharged by expiration of term of service	2		2
Transferred to other hospitals	4		4
Otherwise disposed of	54	281	335
Total dispositions in 1912	324	313	637
Remaining Dec. 31, 1912	141	150	291
Total accounted for	465	463	928

Fifty-four deaths occurred during the year. Of this number, 2 were officers, 21 enlisted men, 24 beneficiaries of the Soldiers' Home, and 7 civilians. Chronic pulmonary tuberculosis caused 42 deaths, tubercular meningitis 2, lobar pneumonia 2, acute pneumonic tuberculosis 1, several other diseases 1 each.

The following is a statement of discharges from the Army, with causes, of enlisted patients:

By expiration of term of service	2
For disability:	
Pulmonary tuberculosis	80
Morphinism, chronic	1
Laryngitis, tuberculous	1
Leukemia, spleno-medullary	1
Rheumatism, acute, articular	1
Mental insufficiency	1
Total	87

Forty-nine surgical operations were performed during the year, of which number 48 were successful and 1 was a failure. There were no deaths following operations.

The following is a condensed statement:

Genito-urinary	8	Skin and cellular tissues	14
Anus and rectum	6	Mouth and pharynx	2
Abdomen	11	Others	6
Thorax	2		

The laboratory work of the year may be itemized as follows:

Examinations of sputum	8,197	Miscellaneous examinations	39
Examinations of urine	1,725	Autopsies, human	52
Examinations of blood	372	Autopsies, bovine	11
Tuberculin tests, bovine	183	Histological examinations	256
X-ray examinations and photography	89	Others	212

The commanding officer states:

There were admitted 2 cases of tuberculosis without pulmonary involvement (1 of tuberculous orchitis, 1 of tuberculous cystitis) and 32 cases of suspected pulmonary tuberculosis in which the diagnosis has not been confirmed, the larger part of these being cases of chronic bronchitis. The large number of cases of chronic bronchitis was chiefly due to the unusual prevalence of this disease at Vancouver Barracks, Wash. Usually the mistake in diagnosis is of the reverse kind—pulmonary tuberculosis is considered to be simply bronchitis. In the cases now under consideration the profuse purulent expectoration, the presence of more or less fever, and the youth of the patients led to the rendering of the diagnosis of probable pulmonary tuberculosis, although the sputum was always negative for tubercle bacilli. In cases of soldiers who usually become entitled to a pension if discharged for tuberculosis, while an early diagnosis of their condition is undoubtedly desirable, it is equally important in the interest of the individual as well as of the Government that the diagnosis of tuberculosis should be based only upon well-marked and characteristic physical signs. The finding of tubercle bacilli in the sputum should not, of course, be insisted upon as a necessary condition in making the diagnosis of tuberculosis of the lungs, at the same time its absence in a series of cases in which the sputum is abundant should excite suspicion as to the nature of the disease.

The number of completed cases of pulmonary tuberculosis in 1912 was 394. Important complications were present in 159 cases, as follows:

Tuberculous laryngitis	65
Tuberculous pleurisy	59
Otitis media, chronic, purulent	14
Syphilis	14
Asthma	9
Myocarditis	6
Fistula in ano	6
Valvular disease of the heart	4
Epididymitis and orchitis, tuberculous	4
Enteritis, tuberculous	4
Adenitis, tuberculous	5
Alcoholism, chronic	3
Cystitis, tuberculous	2
Empyema	2
Meningitis, tuberculous	2
Nephritis, chronic	2
Tuberculous disease of hip joint, Pott's disease, tuberculous pneumothorax, psoas abscess, and bronchiectasis (each)	1

The following table shows the result of treatment in all cases of pulmonary tuberculosis:

Class.	Number.	Apparently cured.		Arrested.		Improved.		Unimproved.		Died.	
		Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.
Incipient	46	10	21.74	13	28.26	14	30.43	9	19.57	.....	.....
Moderately advanced	288	18	6.25	49	17.01	168	58.33	50	17.36	3	1.05
Far advanced	337	4	1.19	15	4.45	170	50.45	101	29.95	47	13.96
Acute miliary	1	.....	.....	.....	.....	.....	.....	.....	.....	1	100.00
Total	[1] 672	32	4.78	77	11.40	352	52.38	160	23.80	51	7.64

[1] Includes 83 cases under treatment one month or less. Does not include 3 cases under treatment less than one week.

The result of treatment in completed cases of pulmonary tuberculosis was as follows:

Class.	Number.	Apparently cured.		Arrested.		Improved.		Unimproved.		Died.	
		Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.
Incipient	27	10	37.04	7	25.92	8	29.63	2	7.41	.....	.....
Moderately advanced	164	10	6.10	14	8.54	111	67.68	26	15.85	3	1.83
Far advanced	202	2	.99	3	1.49	94	46.53	56	27.72	47	23.27
Acute miliary	1	.....	.....	.....	.....	.....	.....	.....	.....	1	100.00
Total	[1] 394	22	5.58	24	6.09	213	54.06	84	21.32	51	12.95

[1] Includes 47 cases under treatment one month or less and 4 fatal cases under treatment one week or less.

The mean strength of the personnel on duty at this hospital for the year was as follows:

Medical officers (including 3 under treatment for tuberculosis)	10.7
Other officers (including 2 officer patients on light duty)	3.0
Hospital Corps (not including 3.16 per cent under treatment for tuberculosis)	121.89
Post noncommissioned staff (quartermaster sergeants, quartermaster corps)	2.98
Quartermaster Corps	.12
Signal Corps	.207
Army Nurse Corps	20.814

ARMY AND NAVY GENERAL HOSPITAL, HOT SPRINGS, ARK.

This hospital is intended especially for patients having diseases in which hydrotherapeutic treatment is indicated. Paragraph 1463, Army Regulations, 1910, states that—

> The Army and Navy General Hospital, Hot Springs, Ark., is under the direction of the Secretary of War, and is devoted to the treatment of the officers and enlisted men of the military and naval service of the United States, cadets at the United States Military and Naval Academies, officers of the Revenue-Cutter Service, officers of the Public Health and Marine-Hospital Service, and honorably discharged soldiers and sailors of the Regular and Volunteer Army and Navy of the United States, for such diseases as the waters of the hot springs of Arkansas have an established reputation in benefiting.

Some improvements and additions were made during the year. A new diet kitchen was provided; the old ice plant was replaced by a new 12-ton refrigeration system having a capacity of not less than 5 tons of ice daily; the heating system has been improved; several additions have been made to the laundry equipment; and a new room has been furnished and equipped in the basement of the administration building for use as an X-ray treatment room, with an adjoining dark room. The commanding officer states that steps have been taken to secure bids for the construction of a new nurses' home. He states that the additions most urgently needed are, in the order of their immediate importance, an officers' ward, quarters for noncommissioned officers, barracks for Hospital Corps. Next to these the greatest need is for an addition to and renovation of the bathhouse. During the year, 815 cases were admitted, this being an increase of 69 over the preceding year. Of this number 34 were officers, 104 enlisted men, 38 retired officers, 87 retired enlisted men, and 552 civilians, chiefly veterans of the Civil War, admitted in accordance

with the law. The daily average was 99.5. The following tables show the principal causes of admission and method of disposition of all cases:

Remaining in hospital Dec. 31, 1911	115
Admissions:	
Diseases of the respiratory system	14
Diseases of the heart	19
Diseases of the urinary system	40
Rheumatism, articular	121
Rheumatism, muscular	35
Gastritis	12
Hernia, inguinal	6
Diseases of the kidneys	34
Arthritis	38
Syphilis and results	47
Gonorrhea and results	9
Diseases of the circulatory system	140
Malarial affections	8
Injuries	25
All other causes	267
Total	930
Dispositions:	
Returned to duty	100
Died	18
Discharged on surgeon's certificate of disability	36
Transferred	4
Discharged from hospital (civilians)	661
Otherwise disposed of	9
Remaining Dec. 31, 1912	102
Total	930

There were 18 deaths during the year; of this number 1 was an officer, 3 were enlisted men, and 14 were civilians. The following table shows the causes of deaths:

Chronic interstitial nephritis	2
Chronic parenchymatous nephritis	2
Diarrhea, chronic	1
Mitral regurgitation	2
Aortic obstruction and mitral regurgitation	1
Mitral insufficiency	1
Asthenia	1
Paralysis agitans, complicated by diarrhea	1
Carcinoma, pylorus and liver	1
Crushing injury to chest	1
Myelitis, chronic	1
Pyonephrosis and secondary pneumonia	1
Septicemia and lobar pneumonia	1
Pneumonia	1
Carcinoma of colon	1
Total	18

There were 36 discharges on certificate of disability.

Arthritis deformans general	2
Rheumatism, articular	4
Nervous and mental diseases	8
Diseases, heart, and blood vessels	2
Result of amputations	4
Nephritis	2
Others	14
Total	36

Suitable equipment for the handling of all surgical cases that may arise is being furnished this hospital. The surgical work done is gradually increasing. During the year 29 surgical operations were performed. The laboratory has been thoroughly equipped for all bacteriological work, including the Wassermann test. The following is a statement of the laboratory work done:

Examinations of blood	139
Examinations of feces	23
Examinations of sputa	24
Examinations of urine	1,454
Wassermann tests	55
Others	19
Total	1,714

The mean daily strength of the personnel on duty during the year was as follows:

Medical officers	4.32
Post noncommissioned staff	1.00
Hospital Corps	54.17
Army Nurse Corps	4.75
Mean aggregate	64.24

DIVISION HOSPITAL, MANILA, P. I.

The name of the general hospital at Manila, which has been heretofore the Division Hospital, was changed to "Department hospital" by C. A. R. 26, 1913.

This hospital is the general hospital for the Philippine Islands. It differs from the general hospitals in this country in that it is not directly under the control of the Surgeon General, but owing to its geographic location it is under the authority of the division commander. Several improvements and additions to this hospital, mentioned in the last annual report as very necessary, were made during the year.

1. A second story was built over a portion of the quarters of the Hospital Corps detachment for the occupancy and use of the board for the study of tropical diseases. The work was completed about August 31, 1912. The rooms vacated by the tropical board were equipped with new cabinets, shelves, tables, etc., for use of the general laboratory of the hospital.

2. The commanding officer reported that the building of a maternity ward over a portion of the officers and women's ward was to be completed about March 1, 1913. This ward gives ample accommodations for the care of maternity cases. There are eight rooms for patients. A porch for convalescents is one of the features of this new ward.

There have been a number of minor repairs and improvements. Several buildings have been painted both inside and out. The commanding officer reported on January 1 that when all the work in progress was completed he believed that the hospital would be in better general repair than it has ever been since its occupancy as a military hospital by the Army of the United States.

In regard to new construction the commanding officer is of the opinion that it would be economy in the end to build a new concrete hospital, on the pavilion plan, on the present site, provided the Amer-

ican occupancy is to continue. At the present time an intercommunicating telephone system is needed to facilitate administration, and an automobile ambulance is requested by the commanding officer. There is also some additional repair work necessary.

The total number admitted to this hospital during the year, including civilians entitled to medical treatment, was 2,641.

Admissions, 1912.

	Medical.	Surgical.	Total.
Officers	96	53	149
Enlisted men (American)	1,057	565	1,622
Philippine Scouts	91	46	137
Civilians	405	328	733
Total	1,649	992	2,641

In addition to this number there were 107 patients remaining under treatment December 31, 1911, making a total of 2,748 treated. This was an increase of 229 over the preceding year.

The daily average was:

Officers	7.01
Enlisted men (American)	81.50
Philippine Scouts	13.22
Civilians	20.08
Total	121.81

The following table shows the movement of the sick, together with the principal causes of admission, during the year 1912:

Cause.	Officers.	Enlisted men (Americans).	Scouts.	Civilians.
ADMISSIONS.				
For gunshot wounds		4	2	
Diarrhea and dysentery	5	33	6	15
Malarial fevers	8	67	18	15
Typhoid fever			1	
Rheumatic affections	5	25	5	27
Venereal diseases	4	353	8	35
Injuries	11	92	8	82
Insanity	1	39	5	5
Alcoholism		46		11
All other causes	115	963	84	543
Total	149	1,622	137	733
Total admissions during the year				2,641
Remaining in hospital and quarters Dec. 31, 1911				107
Total to be accounted for				2,748
DISPOSITIONS.				
Returned to duty	113	1,355	89	15
Discharged on surgeon's certificate of disability			45	
Discharged expiration term		2	1	
Deaths, all causes		9	1	13
Transferred other hospitals	29	270		
Otherwise disposed of	7	3		698
Total	149	1,639	136	738
Aggregate				2,662
Remaining in hospital Dec. 31, 1912				83
Remaining in quarters, Dec. 31, 1912				3

There was only one case of typhoid fever treated during the year. This case was an unvaccinated scout, who died. Not a case of beriberi (military) was treated here during the year. Twenty-three deaths occurred as compared with 15 in 1911. The following table shows these deaths with causes:

Cause.	Officers.	Enlisted men.	Scouts.	Civilians.
Burns:				
Toxemia following				1
Shock following				1
Cancer of liver			1	
Cardiac dilatation				1
Colitis, acute catarrhal				1
Delirium tremens, alcoholic		1		
Hemorrhage:				
Intestinal				1
Gastric		1		
Cerebral				1
Injuries (fracture of skull)		1		
Malarial fever		1		
Nephritis, chronic		1		
Œdema of brain, alcoholic		1		
Peritonitis:				
Typhoid fever		1		
Appendicitis		1		
Pneumonia:				
Lobar				1
Broncho				1
Poisoning:				
Bichloride of mercury				
Phenol, accidental				1
Tetanus				2
Valvular heart disease				1
Injuries, shock following		1		
Total	0	9	1	13
Aggregate, all classes				23

American soldiers are not discharged for disability in the Philippine Islands, except in very rare cases, and there were none discharged there in 1912. All the native enlisted men physically disabled for service, are discharged in the islands. The following table shows the number discharged at this hospital during the year with causes:

Carcinoma, cervical, bilateral	1	Neurasthenia	1
Defective teeth	1	Rheumatism, muscular	1
Eye trouble:		Synovitis, chronic, right knee	1
Retino-choroiditis, bilateral	1	Tuberculosis, pulmonary	22
Leukoma, right eye	1	Tuberculosis of cervical glands	1
Fistula in ano	1	Wounded in action:	
Gonorrheal cystitis	1	Loss of left arm	3
Gonorrheal arthritis	1	Loss of left hand	1
Hysteria, major	1	Painful scar	1
Insanity, all classes	4		
Loss of left leg	1	Total	45
Mental constitutional inferiority	1		

In 1911 there were 26 discharges for disability at this hospital.

An active surgical clinic is maintained. The following is a statement of surgical conditions for which operations were performed.

Abscesses:	
Hepatic	2
Appendicital	1
Periurethral	3
Others	10
Cellulitis	5
Cystic ovary	5
Compression of brain	1
Abdominal carcinosis	1
Dislocations of elbow	5
Endometritis	16
Empyema	3
Fistula in ano	6
Fractures	5
Hernia	18
Adenitis	66
Appendicitis	47
Abortion	3
Cholelithiasis	2
Cholecystitis	3
Hemorrhoids	15
Hydrocele	8
Hæmothorax	2
Intestinal obstruction	1
Phimosis	25
Peritonitis	1
Sarcoma	1
Uterus malposition	11
Varicocele	6
Others	89

There were 12,559 dressings.

In the obstetrical department 39 labors occurred at term.

The following is a report of the hospital laboratory work during the year:

Examination of—	
Blood	1,616
Feces	632
Sputum	918
Urine	2,669
Smears	476
Water	533
Wassermann reactions	1,740
Examination of—Continued.	
Autopsies	14
Cultures	70
Milk test	4
Stomach contents	13
Sections	23
Vaccines	14

The average number of medical officers on duty was 12, dental surgeons 2, Hospital Corps men 97, Army Nurse Corps 22.

Two hundred and twenty-three patients were transferred to the United States either for discharge on certificate of disability or for further treatment. Of this number 59 were for tuberculosis, 44 for insanity, and 11 for gonorrheal arthritis.

One hundred and eighty-five operations were performed on the eye, ear, nose, or throat. There were 10,619 dressings or treatments and 402 refractions.

PROVIDENCE HOSPITAL.

The act approved March 24, 1912, having appropriated $19,000 for the support and medical treatment of destitute patients in the city of Washington, D. C., under a contract to be made with Providence Hospital by the Surgeon General of the Army, the relief afforded was as follows:

Patients in hospital July 1, 1912	87
Admitted during the year	1,281
Total number treated	1,368
Average number admitted per month	114
Number remaining in hospital June 30, 1913	96
Total number of days' treatment afforded	35,463
Average number of days' treatment per patient	26
Average number of patients treated per day	97
Longest term of treatment (days)	365
Shortest term of treatment (days)	1
Number of patients in hospital during the whole year	1

LABORATORIES.

In compliance with the request of this office of March 6, 1912, Capt. Clarence L. Cole, Medical Corps, United States Army, who was in charge of the laboratory at Fort Leavenworth, was directed to proceed to Fort Sam Houston, Tex., for the purpose of establishing a laboratory at that post for the use of the Southern Department. A laboratory is thus provided for each of the departments; the one at the Army Medical School, Washington, D. C., for the use of the Eastern Department; at Fort Leavenworth for the Central Department; at the Letterman General Hospital for the Western Department; and, as stated, at Fort Sam Houston for the Southern Department. The laboratory of the tropical board has been doing the special work required of a department laboratory for the Philippine Division, and one will ultimately be established at Honolulu in connection with the department hospital for the work in that department.

Army Medical School.

No changes of importance have been made in this bacteriological laboratory during the past year. The work has been of a varied character, as shown in the following summaries:

TYPHOID FEVER PROPHYLACTIC.

Prophylactic was prepared in the laboratory and distributed during the six months periods as follows:

	June 30, 1912.	Dec. 31, 1912.	June 30, 1913.
	c. c.	c. c.	c. c.
Army	87,387	57,972	98,169
Navy	153,408	33,876	32,566
National Guard	23,136	12,248	28,031
Various Government departments	1,581	725	1,195
Civilians and civil institutions	1,306	362	454
Total	266,818	105,183	160,415

The usual dose is 1 cubic centimeter, except the first dose, which is 0.5 cubic centimeters.

No changes have been made in the method of preparation of the prophylactic, since the results with that at present in use have been all that could be desired.

As there are not more than two or three cases of paratyphoid fever reported yearly, it is evidently not necessary, at least in our service, to use a mixed typhoid and paratyphoid vaccine, and none has been used.

GONOCOCCUS VACCINE.

The use of gonococcus vaccine in the treatment of arthritis and other complications of gonorrhea shows a steady increase: 2,350

cubic centimeters were prepared in 1912, and 1,150 cubic centimeters during the first six months of 1913. An effort has been made to secure reports but not many have been submitted. The results reported to this office are shown in the following table:

Results obtained from the use of gonococcus vaccine.

	Cured.	Much improved.	Improved.	Not improved.	Treatment not completed.	Total.
Gonorrhea:						
Acute	15					15
Chronic	15		1	4		20
Epididymitis	13					13
Arthritis:						
Acute	5	1	5			11
Chronic	2	6	3	6	2	19
Ophthalmia, acute				1		1
Total	50	7	9	11	2	79

Gonococcus, staphylococcus, and streptococcus vaccines prepared and distributed during the six months' periods.

	June 30, 1912.	Dec. 31, 1912.	June 30, 1913.
Gonococcus:	c. c.	c. c.	c. c.
Army	576	543	737
Navy		12	
Civilians and civil institutions		4	
	576	559	737
Staphylococcus:			
Army	456	575	634
Civilians and civil institutions	37		6
	493	575	640
Streptococcus:			
Army	32	18	28

In addition to the vaccines mentioned, the following were prepared during the fiscal year ending June 30, 1913:

	c. c.
Autogenous	115
Pneumococcus	10
Acne	275
Staphylococcus-acne	500

Summary of clinical laboratory examinations of typhoid fever cases.

	Six months' periods ending—		
	June 30, 1912.	Dec. 31, 1912.	June 30, 1913.
Examinations of typhoid cases	183	321	246
Convalescents examined:			
Positive	6	3	2
Negative	10	11	10
Suspected carriers of contacts examined:			
Positive	19	26	8
Negative	48	92	74
Widals:			
Positive	18	32	47
Negative	33	62	45

Summary of clinical laboratory examinations of typhoid fever cases—Continued.

	Six months' periods ending—		
	June 30, 1912.	Dec. 31, 1912.	June 30, 1913.
Blood cultures:			
Positive	2	6	3
Negative	14	40	37
Blood cultures from clots:			
Positive	1	1	0
Negative	22	27	18
Examination of feces for b. typhosus:			
Positive	13	15	4
Negative	51	70	73
Examination of urine b. typhosus:			
Positive	3	0	0
Negative	44	53	30
Examination of feces for b. paratyphosus:			
Positive	0	1	0
Negative	0	8	0
Examination of feces for b. dysinteria:			
Positive	0	0	0
Negative	5	5	6
Gall bladder:			
Positive	0	2	1
Negative	0	0	1
Gall stone:			
Positive	0	0	0
Negative	0	1	1
Exudate from wound:			
Positive	0	0	0
Negative	0	1	0
Sputum:			
Positive	0	0	0
Negative	0	0	1

No chronic bacillus carriers were detected during 1912, and only one during the first half of 1913. The greater part of the material examined during the past 12 months has come from civilians at Army posts and not from the Army itself. In this, as in preceding reports, a few positive blood cultures from clots are shown. The clot is obtained from the small sample of fluid blood sent to the laboratory for Widal tests. For this purpose Wright's capsule, a hook-shaped glass tube, is in general use. With a clear serum a macroscopic Widal is made; the clot is broken up and spread over an Endo plate, from which subcultures are made in the usual manner. The method requires very little time and occasionally affords valuable information; by this method, during the past four years, about twenty cultures of the *bacillus typhosus* have been isolated.

Summary of clinical laboratory examinations.

	Six months' period ending—		
	June 30, 1912.	Dec. 31, 1912.	June 30, 1913.
Blood clots:			
Red	16	5	6
White	18	20	27
Differential counts	13	25	46
Malaria	29	63	68
Blood cultures	0	5	23
Urinalyses	164	101	77
Sputa for tubercle bacilli:			
Positive	1	77	6
Negative	27	35	29

Summary of clinical laboratory examinations—Continued.

	Six months' period ending—		
	June 30, 1912.	Dec. 31, 1912.	June 30, 1913.
Feces	35	55	57
Water, bacteriological	22	27	34
Cultures of pus, exudated, etc	49	38	121
Animal inoculations for immune sera, etc	39	137	157
Histological examinations of operative and post-mortem tissues	454	342	489
Miscellaneous examinations, gonococcus, etc	76	54	48
Wassermann examinations:			
Positive	678	601	559
Negative	653	256	624
Reexaminations	787	1,337	1,352
Examinations for treponema pallidum:			
Dark field microscope—			
Positive	4	8	8
Negative	12	12	14
Staining—			
Positive	3	1	0
Negative	2	5	0
Examinations:			
For trypanosomes	491	400	500
For coli bacilli	110	75	70
Treatments:			
For salvarsan	32	23	12
By bacterial vaccines	287	360	246
Luetin tests	.....	22	28
Malta fever	.....	5	0
Spinal fluid	.....	4	8

STUDIES OF SYPHILIS.

During the year various phases of the syphilis question have been under investigation, and the results of the research work along this line have been published in a bulletin (Bulletin No. 3, Medical Department, United States Army) by Capts. Charles F. Craig and Henry J. Nichols.

REPORT UPON WASSERMANN TESTS.

During the year ending June 30, 1913, the total number of Wassermann tests made in this laboratory has been 4,729, of which 2,689 were reexaminations, made for the control of treatment. Of the 2,040 new cases tested, 1,160 were diagnosed as syphilis, and of these 984, or 84.8 per cent, gave a positive reaction.

The following tables give the result of the Wassermann test in the cases diagnosed as syphilis, or presenting suspicious symptoms of that disease, examined during the year ending June 30, 1913:

TABLE I.—*Results of the Wassermann test in cases diagnosed as syphilis, from July 1, 1912, to June 30, 1913.*

Stage of disease.	Number of cases.	Positive.	Negative.	Per cent positive.
Primary	242	208	34	85.9
Secondary	459	430	29	93.6
Tertiary	177	162	15	91.5
Latent	282	184	98	65.2
Total	1,160	984	176	84.8

The above table includes 13 cases of primary syphilis tested within three days after the appearance of the initial lesion, a period, it is believed, too early to obtain a positive Wassermann reaction, and 10 secondary cases tested after vigorous treatment, sufficient to have rendered a positive reaction negative. Therefore, in justice to the test, these cases should be deducted from the total number examined, and Table II gives the results after deducting these cases.

TABLE II.—*Results of the Wassermann test in 1,137 cases of syphilis examined from July 1, 1912, to June 30, 1913.*

Stage of disease.	Number of cases.	Positive.	Negative.	Per cent positive.
Primary	229	208	21	90.8
Secondary	449	430	19	95.7
Tertiary	177	162	15	91.5
Latent	282	184	98	65.2
Total	1,137	984	153	86.5

The results in the primary and tertiary stages of the disease shown in the above tables are the best that have yet been secured in this laboratory, over 90 per cent of the cases in each stage of the disease giving a positive result. This has been entirely due, it is believed, to the fact that the laboratory has been using this year an unusually effective antigen. While the bacteriologists there have always used as antigen an alcoholic extract of fœtal syphilitic liver, these antigens have varied considerably in fixation power, and in this particular case the antigen has been unusually reliable. It is perfectly evident that the accuracy and value of the Wassermann test depend almost entirely upon the reliability of the antigen employed aside from technical considerations, and in this laboratory no antigen has proven as satisfactory as that made from fœtal syphilitic livers.

A review of the Wassermann tests made in this laboratory since November 1, 1909, to date, may be of interest, as the very large number of sera tested enables one to secure an accurate idea of the percentage of positive reactions that may be expected in the various stages of syphilis.

The total number of tests made has been 13,455, of which 6,730 were reexaminations made for the purpose of controlling treatment, while 6,725 individuals were tested for diagnostic and experimental purposes. Of this number, 215 tests were made upon as many individuals in experimental work. Of the 6,275 individuals tested, 4,395 were diagnosed as syphilis, or presented suspicious symptoms of the disease. Of this number 3,670 gave a positive reaction, or 83.5 per cent. Included in this number are 80 cases in the primary stage of syphilis tested during the first three days after the appearance of the initial lesion, a period too early for a positive Wassermann reaction to be present, so far as our experience goes. In addition 71 of the secondary cases had received sufficient treatment to have rendered the reaction negative, so that these cases should be deducted from the total number if it is desired to secure a just conception of the exact results obtained in the various stages of syphilis with the Wassermann test.

In Table No. III is given the results of the Wassermann test in 4,244 cases of syphilis tested in this laboratory. These cases were all diagnosed as syphilis or presented symptoms of that disease, and it is believed that the figures demonstrate just about what the Wassermann test is capable of as an aid to diagnosis in the various stages of syphilis.

TABLE III.—*Results of the Wassermann test in 4,244 cases of syphilis.*

Stage of disease.	Number of cases.	Positive.	Negative.	Per cent positive.
Primary	823	740	83	89.9
Secondary	1,774	1,706	68	96.1
Tertiary	581	515	66	88.6
Latent	1,016	669	347	65.8
Congenital	28	25	3	89.2
Parasyphilitic	22	15	7	68.1
Total	4,244	3,670	574	86.4

The comparatively low percentage of positive results in congenital cases and in parasyphilitic disease is in part due to the small number of cases tabulated and in part to the character of the cases, many of the congenital cases being in adults, and at least half of the parasyphilitic cases suffering from ataxia.

X-RAY LABORATORY.

In this laboratory the work done in addition to instruction is represented by the following table:

Radiographs made	2,018
Lantern slides	330
Photomicrographs	160

LETTERMAN GENERAL HOSPITAL.

1. The amount of work performed in the laboratories, for the year 1912, was almost identical with that recorded for the previous year. The tables appended show an increase in the number of cases receiving thermal and hydrotherapeutic treatments and in the number of radiographs taken. The former increase was due to the establishment during the year of a modern hydrotherapeutic room, equipped with a Baruch table, electric light cabinet, etc.

2. Capt. John R. Barber, Medical Corps, was the pathologist for the last 11½ months; he did all of the Wassermann reactions and most of the bacteriological work.

3. The most difficult and important work assigned to the pathologist is the complement fixation test (Wassermann reaction), of which 2,426 were performed with eminently satisfactory results. Last year a luetic gastric ulcer that had masqueraded for several years as a simple ulcer and in defiance of all treatment, was reported as diagnosticated with the aid of the serum reaction and cured by specific treatment. A similar case occurred in one of the wards this year, and responded even more promptly to treatment. Two cases of low continued fever, both undoubtedly due to pulmonary syphilis, in

which tuberculosis was suspected, but in which neither tubercle bacilli nor physical signs significant of tuberculosis were found, gave positive reactions and responded to mercury hypodermically. Noguchi's luetin reaction has been employed in about a dozen cases and with apparently gratifying results. The small experience with the test the authorities believe warrants a more extended use of this diagnostic agent, especially in those tertiary cases associated with a negative Wassermann reaction.

"The complement fixation test, in gonorrheal infections, has been performed a few times with an antigen presented for experimental purposes. The reactions carried out with sera for patients known to be infected from controls turned out as expected. In the military service it is believed that if this test can be made as reliable as the Wassermann reaction it will prove of incalculable service. However, great difficulty has been experienced in making a dependable antigen, and at present this subject is receiving our attention. After many failures we have at last succeeded in getting three strains of gonococci to grow, and hope by another year to be able to employ this test as a routine measure."

4. During the year an epidemic of rabies occurred among the dogs of the city and Presidio reservation. The diagnosis was confirmed in the dogs by finding Negri bodies in 4 cases, and in 1 case Negri bodies were found in the brain of a man who died of this disease in the city, and was further confirmed in the laboratory by inoculating a dog subdurally. This experience would corroborate that of others that the finding and significance of Negri bodies in the brains of animals suspected of having the disease is a speedy, reasonably easy, and certain means of identifying hydrophobia. The Pasteur treatment was given to 10 people bitten by rabid or presumably rabid dogs. In no case did the disease develop in the subjects so treated.

5. One case of cerebrospinal meningitis, due to the diplococcus of Weichselbaum, was admitted to the hospital during the month of December. The organism was readily found in the leucocytes from the spinal fluid. The man was given antimeningitis serum intraspinally and convalesced promptly.

6. A patient with a splenic anemia which the laboratory findings proved to be a case of Banti's disease was admitted to a medical ward and subsequently transferred to the surgical side for a splenectomy which was successfully accomplished, resulting in an apparent cure.

7. Ova of the Dibothriocephalus latus tapeworm were discovered in a stool examination and subsequently verified by obtaining the entire parasite with male fern.

Record of examinations made in the pathological, bacteriological, and chemical laboratories during the year ending December 31, 1912.

Blood examinations	972	Sera for treponema	104
Urine examinations	3,356	Vaccines prepared	51
Sputum examinations	1,628	Water analyses bacteriological	336
Feces examinations	412	Water analysis, chemical	14
Pus examinations	692	Milk analyses	38
Culture examinations	623	Malt extract for alcohol content	19
Tissue examinations	169	Animal injections	136
Fluids by aspiration	30	Autopsies	45
Sera for lues (Wasserman)	2,426	Miscellaneous	17
Stomach contents	73		

Examinations of suspected typhoid specimens as follows:

Widal reactions	47
Blood cultures	18
Feces	32
Urine	21

Antityphoid vaccinations as follows:

Complete	33
Incomplete	12
Undergoing vaccination	1

Record of cases treated in the X ray, electrical, and thermal treatment laboratories during the year ending December 31, 1912.

Radiographs taken, 838, with conditions found as follows:

Fractures	283	Arthritis	14
Dislocations	19	Calculi	3
Disease of bone	38	Stricture of oesophagus	3
Aneurysm	12	Gastro-intestinal after taking bismuth	67
Foreign bodies	27	Normal	326
Synovitis	16		
Tumors	12	Total	838
Impacted teeth	16		
Spinal curvature	2		

Cases were treated by the X ray as follows:

Leukemia	2
Eczema	3
Epithelioma	2
Carcinoma	1
Lupus	3
Hodgkin's disease	1
Total	12

Cases treated by galvanic, Faradic, and high frequency electricity as follows:

Facial paralysis	2
Neurasthenia	12
Hemiphlegia	2
Muscular paralysis	7
Rheumatism	9
Synovitis	4
Old injuries	6
Total	42

Two hundred and sixteen cases were treated in the thermal and massage treatment department with a total of 6,642 treatments.

Fort Leavenworth, Kans.

The number of examinations for the year exceeds that of any previous year in the history of the laboratory. The scope of the work has been widened also. The Wasserman test (Noguchi modification) is now done for all the posts in the Central Division, and, in addition to the routine laboratory examinations in connection with the various clinical departments of the post hospital, various examinations have been made of specimens submitted from other posts. The post water supply and milk supply have been examined at periodical intervals, food analyses have been made for the commissary and post exchange,

and examinations of specimens from suspected cases of typhoid fever have been conducted for other posts, as heretofore. A summary of the work follows:

Summary of laboratory work in the laboratory at Fort Leavenworth, Kans., for the year ending December 31, 1912.

Typhoid examinations	74
Agglutination tests (Widal):	
Positive	6
Negative	11
Blood cultures:	
Positive	3
Negative	21
Typhoid feces:	
Positive	3
Negative	17
Typhoid urines:	
Positive	0
Negative	13
Examinations of sputum	81
Urinalyses	744
Examinations of feces	55
Blood examinations	245
Examinations of cultures:	
Throat	255
Others	311
Total	566
Examinations of smears:	
Urethral	146
Others	44
Total	190
Analyses of gastric contents	7
Food analyses	33
Animal inoculations	46
Water analyses	157
Chemical	15
Bacteriological	142
Examinations of milk	104
Chemical	72
Bacteriological	32
Wassermann tests	2,078
Antogenous vaccine prepared	11
Histological examinations of tissues	4
Autopsies	10
Treatments with salvarsan	23
Treatments with vaccine and sera	1,841
Typhoid prophylatic	1,689
Other vaccines and sera	152
Luetin tests for syphilis (Noguchi)	54
Total diagnostic, prophylactic, and therapeutic procedures for the year	6,323

MEDICAL DEPARTMENT.

The Medical Department consists of the Medical Corps, the Medical Reserve Corps, the Dental Corps, the Army Nurse Corps, and the Hospital Corps.

The following statement shows the strength of the personnel, commissioned, enlisted, and employed, by contract or otherwise, of the Medical Department on June 30, 1913:

Medical officers	424
Medical reserve officers, active duty	105
Contract surgeons	9
Dental surgeons, commissioned	28
Acting dental surgeons, under contract	23
Army Nurse Corps	125
Hospital Corps	3,419
Civil employees	236
Total medical personnel	4,369

MEDICAL CORPS.

The Medical Corps is composed of the commissioned medical officers of the Regular Army.

Authorized strength June 30, 1913	445
In service June 30, 1912	414
Appointed during the year	22
Total	436
Losses during the year	12
In service June 30, 1913	424

On October 1, 1912, 26 candidates who had passed the preliminary examination for appointment in the Medical Corps reported at Washington to take the course of instruction at the Army Medical School. Twenty-four successfully completed the course of instruction at the school and were graduated May 31, 1913; 22 of the graduates were recommended for appointment in the Medical Corps of the Army. One student officer, owing to illness, was prevented from taking the full course at the school and was not graduated and given a commission, but was retained under his commission in the Medical Reserve Corps and will again be ordered to the school as a member of the next class for the purpose of completing the course.

Losses during the fiscal year.

	Colonels.	Lieutenant colonels.	Majors.	Captains.	First lieutenants.	Total.
Retired	4		1	1	1	7
Resigned				1	2	3
Discharged					1	1
Died				1		1
Aggregate	4		1	3	4	12

The death was Capt. Clarence A. Treuholtz, April 15, 1913.

PROMOTIONS DURING THE FISCAL YEAR.

The following promotions were made: Four lieutenant colonels to be colonels; 4 majors to be lieutenant colonels; 5 captains to be majors; 45 lieutenants to be captains.

The department has continued to hold preliminary examinations for appointment in the corps the second Monday in each month at San Francisco, Fort Sheridan, and Washington, D. C. During the fiscal year 24 applicants passed the preliminary examinations. Of this number 15 attended the session of the Army Medical School, which ended May 31, 1913, leaving 9 who will attend the next session of the school. A preliminary examination will be held on July 14, 1913, at various Army posts throughout the United States, to which 53 applicants have been invited.

Owing to the fact of the small number of vacancies now existing in the Medical Corps monthly examinations will no longer be held. It is proposed to convene boards at various posts throughout the United States in January and July. Candidates will be authorized to present themselves for examination at the points nearest their respective places of residence.

MEDICAL RESERVE CORPS.

On roster June 30, 1912		1,105
Appointed during the year		153
		1,258
Losses during the year:		
Resigned	21	
Discharged	5	
Died	4	
Commissions vacated by appointment to regular corps	23	
		53
On roster June 30, 1913		1,205

Of the 1,205 on roster June 30, 1913, 105 were on active duty and 1,100 on the inactive list.

On active list June 30, 1912		115
Ordered to active duty during the year		62
		177
Relieved from active duty	41	
Commissions vacated	23	
Honorably discharged	1	
Resigned	7	
		72
On active duty June 30, 1913		105

An officer of the Medical Reserve Corps residing in the vicinity of each military post has been designated as a locum tenens, and the policy has been adopted of calling such officer into active service for duty at his post when all the regular medical officers thereat are called upon to accompany troops into the field. When the Second Division was mobilized in February, 1913, the medical officers were thus enabled to promptly leave the posts with the troops, their places being filled in the manner indicated.

The medical service of the encampment of the veterans of the Union and Confederate Armies at Gettysburg devolved upon the Army, and it was necessary to supplement the regular Medical Corps to provide for the large number of men assembled at that camp. This was done by ordering 23 officers of the Medical Reserve Corps to active duty for a period of a few days, and having them report to the chief surgeon of the Gettysburg encampment on the 28th of June, which arrangement proved to be very satisfactory. It not infrequently happens that the services of a medical officer are required for a short period in an emergency when an officer of the regular corps is not available, and the emergency can be satisfactorily met by the temporary employment of an officer of the Reserve Corps. Should an emergency arise demanding a considerable number of medical officers in excess of those that could be furnished by the regular establishment, it is believed that the organized Reserve Corps would be a most valuable agency in providing the men without delay.

Great care has been exercised in the selection of the personnel of this organization, and many men of distinction in the medical profession are borne upon its rolls. Since few opportunities have thus far been afforded officers of the Medical Reserve Corps on the inactive list for duty with troops, they are consequently not as familiar as could be desired with the practical details of the specialties of military medicine. They are, however, coming more and more closely in touch with the officers of the regular Medical Corps by personal contact, by correspondence, and through medico-military publications, and in their enthusiasm are acquiring considerable theoretical knowledge along those lines. This makes it certain that when called into active service they would become efficient medical officers much more promptly than would a like number of men selected at random from the civilian medical profession.

It is obvious that a greater opportunity for the acquiring of practical knowledge by service with troops would still further enhance the value of this organization. This could be done to a certain extent by placing a limited number of men on duty for short periods at maneuver camps and camps of instruction. It could be done much more thoroughly by having a considerable number of them serve with the troops for a period of two years. To carry out this idea it is the policy of this office to have relieved from active service as rapidly as it can be done the older officers of the Reserve Corps who have acquired experience with troops, and to replace them by others from the inactive list, these in turn being replaced by others for a period of two years of active service.

CONTRACT SURGEONS.

In service June 30, 1912	11
Contracts made during the year	9
Total	20
Contracts annulled during the year	11
Contracts in force June 30, 1913	9

These contract surgeons are on duty at arsenals, remount depots, etc., at the rates of pay ranging from $75 to $150 per month.

DENTAL CORPS.

Number of dental surgeons in service June 30, 1912	28
Acting dental surgeons in service June 30, 1912	10
Appointed during the year	13
Total	51

The act of March 3, 1911, reorganizing the Dental Corps of the Army and providing for dental surgeons and acting dental surgeons on the basis of 1 per 1,000 with troops, created many vacancies in the Dental Corps, some of which have already been filled, but many still remain. Examinations are held twice yearly at various posts throughout the United States where duly qualified dentists are authorized to present themselves for examinations. Successful candidates are immediately given contracts and assigned to duty at military stations with the status of acting dental surgeons. Acting dental surgeons who serve satisfactorily for a period of three years are eligible for appointment as dental surgeons, and after passing a satisfactory examination will be commissioned with the rank of first lieutenants in the Dental Corps. Inasmuch as the full probationary period has not elapsed since the reorganization of the corps, no promotions have been made under the new scheme.

ARMY NURSE CORPS.

During the period covered by this report the authorized strength of the Army Nurse Corps has been 125. The corps has been kept filled to this limit and these figures represent the actual strength on the last day of the fiscal year 1913.

An increase of 25 nurses has been authorized, effective July 1, 1913, and it is believed that the vacancies thus created can be quite promptly filled from among the approved candidates who have applications on file.

The increase in the number of nurses available for assignment will enable this office to comply with the demand for additional nurses at stations which are now inadequately provided, and will provide for a slight extension of the service to other points. Thus far it has been impossible to station members of the Army Nurse Corps at any of the brigade posts where their services could be used with advantage.

If satisfactory accommodations can be obtained at Fort Leavenworth, it is proposed to send a small detachment to that post for duty.

During the year nurses have been on duty in the United States at the Walter Reed General Hospital, Takoma Park, D. C,; Army and Navy General Hospital, Hot Springs, Ark.; Army General Hospital, Fort Bayard, N. Mex.; the Letterman General Hospital, San Francisco, Cal., and the attending surgeon's office, Washington, D. C.; in the Hawaiian Department at the department hospital, Fort Shafter, Honolulu, and in the Philippines Department at the department hospital, Manila; Fort William McKinley, Rizal, and Pettit Barracks, Zamboanga.

During the fiscal year there have been made 36 new appointments and 8 reappointments; 39 nurses have been discharged. During the same time 549 applications have been received from graduated nurses for admission to the Army Nurse Corps.

Since the date of the last report the enlargement of the nurses' quarters at the Walter Reed General Hospital has been completed. Contracts have been made for the construction of the new quarters at the Letterman General Hospital, San Francisco, Cal., and the Army and Navy General Hospital, Hot Springs, Ark.

The enrolled nurses of the American Red Cross Nursing Service approaching 4,000 in number now constitute the reserve of the Army Nurse Corps, and in time of war or other emergency are with their own consent eligible for assignment to active duty in the military establishment.

HOSPITAL CORPS.

The authorized strength of the Hospital Corps is as follows:

Sergeants, first-class	300
Sergeants	362
Corporals	50
Privates, first-class, and privates	2,800
Total	3,512

The number of sergeants, first-class, is fixed by law, the total strength of the Hospital Corps and the number in the various other grades is determined by Executive order.

Strength at date of last report, June 30, 1912:	
Sergeants, first-class	262
Sergeants	341
Corporals	39
Acting cooks	200
Privates, first-class, and privates	2,654
Total	3,496
Gain July 1, 1912, to June 30, 1913:	
By enlistment and reenlistment	544
By transfer from the line, including unassigned recruits from depots	857
By return from desertion	93
Total	1,494
Loss during same period:	
By discharge, expiration of term of service	870
By discharge, by order	253
By discharge, certificate of disability	57
By discharge, sentence, general court martial	106
Transfer to the line	39
By retirement	21
By death due to disease	9
By death due to drowning, wounds, and other accidental causes	5
By desertion	210
Killed by guard	1
Total	1,571
Leaving in service June 30, 1913:	
Sergeants, first-class	295
Sergeants	336
Corporals	38
Acting cooks	190
Privates, first-class, and privates	2,560
Total	3,419

It will be observed that the Hospital Corps is over 2½ per cent below its authorized strength. It has been found impossible to keep this corps at its normal strength by enlistments, or by voluntary transfer from the line. On four occasions during the year requests have been made to The Adjutant General for the transfer of unassigned recruits from the various depots to fill vacancies, and these requests have been complied with in so far as practicable. About 225 men have been transferred to the corps as a result of this policy. It has not resulted, however, in obtaining the most desirable class of men for service with the sick.

The inspector general, Southern Department, in report dated June 4, 1913, remarks:

> The men transferred to the Hospital Corps from the line are reported to be an inferior grade of men not wanted in the line. A way to avoid this situation is to "enlist directly for the Hospital Corps."

The impracticability of obtaining men as proposed by the inspector general, Southern Department, has been shown above.

Commenting on the remarks of the inspector general, the commanding general of the Southern Department says:

> If the pay of the Hospital Corps is sufficient to attract desirable men, transfer from the line is believed to be the best method of obtaining suitable men.

The fact that the pay is not sufficient to attract the best class of men is shown elsewhere in this report.

Examinations were held in the departments and at independent stations during the year for promotion to the grade of sergeant, and 137 were advanced to this grade. Of this number 15 had served in the same grade. At present there is a shortage in this grade of noncommissioned officers, and it has been necessary to instruct the department surgeons to hold special examinations to secure eligibles for promotion.

On June 18, 1913, the Secretary of War authorized 12 additional sergeants for duty with the Organized Militia, the strength of the Hospital Corps being increased to that extent. The names of 8 of these noncommissioned officers have been submitted for these assignments. The 4 still required for this duty will be designated as soon as men become available as a result of the examination now being held.

The Eastern Department was called upon to send Hospital Corps personnel to Gettysburg, Pa., for duty at camp of Civil War veterans at that place. It was also necessary to send Field Hospital No. 1 Fort D. A. Russell, Wyo., to this camp for duty.

The Eastern Department was also called upon to furnish personnel for duty in the Ohio Valley and Vicksburg flood districts during the disastrous floods of March, 1913.

When the Second Division was concentrated in Texas in February 1913, a considerable proportion of the Hospital Corps personnel of the Central Department accompanied the line organizations from the various posts to the point of concentration, and have since remained on duty with the division. Field Hospital No. 3 and Ambulance Company No. 3 also accompanied the division. The Medical Department personnel for the transports assembled at Galveston was furnished from the Eastern Department.

The authorized strength of the Hospital Corps (3,512) is inadequate for the needs of the service, and does not provide the number of men prescribed by Army Regulations for duty with the Army as now constituted. When the allowance of 3,500 men was fixed for the Hospital Corps, the strength of the Army was less than 76,000. Its present authorized strength, exclusive of Hospital Corps and Philippine Scouts, is about 84,810, and a corresponding increase in the Hospital Corps would bring that organization up to 3,905.

It has been assumed that when the troops of a garrisoned station take the field, the entire Hospital Corps detachment at the post is immediately available to accompany it; such is not the case, as there invariably remain behind not only the enlisted sick, but the families of officers and enlisted men in numbers sufficient to demand that a working hospital be maintained.

As previously stated in this report, it has been impossible to keep the Hospital Corps filled up to its authorized strength by enlistment and reenlistment, and there has been a constant drain upon it by the transfer of desirable men to the line and to other staff corps. This is interpreted to mean that the relative desirability of service in the Hospital Corps has lessened since the organization of the corps.

In his annual report for the fiscal year 1911–12, the commanding general, Central Division, alludes to this condition of affairs in the following terms:

> The discipline and work of the Hospital Corps has been excellent. There has been some difficulty in keeping the detachments up to their authorized maximum strength, as the Hospital Corps does not offer sufficient inducements to make men desire to transfer to it from the line.

When the Hospital Corps was organized in 1887, it was recognized that its members would be required to do work that was not attractive to enlisted men and which required special qualifications. To secure a suitable class of men to do such work, noncommissioned officers of the Hospital Corps were given pay considerably in excess of most noncommissioned officers of the line. At a later date the pay of privates was likewise proportionately increased. This principle was lost sight of in the legislation of 1908, when the pay of the line soldier was increased. In the meantime special grades of noncommissioned officers have been made in other branches of the service and various ratings established whereby the opportunities for promotion of intelligent men have been increased and opportunities for a substantial increase of pay have been provided. Opportunities for extra-duty pay are provided in other branches of the service, but are denied to the Hospital Corps soldier.

Bills are now pending in Congress which provide the following grades and rates of pay for the Hospital Corps:

Sergeants major (new grade) 30, at $75 per month, with the increased pay for service as now authorized for sergeants, first class.

Sergeants, first class, 300, pay to be increased from $50 to $65 per month.

Sergeants, pay to be increased from $30 to $36 per month.

Corporals, $24 per month (no increase).

Privates, first class, pay to be increased from $18 to $21 per month.

Privates, $16 per month (no increase).

These bills were proposed and introduced without any prompting on the part of this office, but are in accordance with its ideas, and it

is believed that if the measure were given the support of the Secretary of War it would become a law.

Such a law would undoubtedly be for the benefit of the service by increasing the desirability of the Hospital Corps and attracting thereto a better class of men; and the additional higher grade contemplated would provide a more adequate compensation for a limited number of specially skilled men, such as pharmacists of exceptional ability, X-ray experts, anesthetists, and others of a class who can now command in civil life a higher rate of pay than is afforded them in the service.

In our service field hospitals and ambulance companies are an outgrowth of the Hospital Corps companies of instruction. In all modern armies such organizations form most important integers of the mobile army.

To date four field hospitals and ambulance companies have been organized for the entire United States Army—a number just sufficient to equip one Infantry division on the basis allowed by Field Service Regulations.

Geographically these organizations are located as follows:

In the Philippine Department, of each	1
In the Western Department, of each	1
In the Central Department, of each	2

Field Hospital No. 1, from the Central Department, is now on detached service at Gettysburg, in the Eastern Department, and Field Hospital No. 3 and Ambulance Company No. 3, from the same department, are with the Second Division at Texas City, Tex. It will thus be observed that there is neither a field hospital or ambulance company which belongs in the Eastern, Southern, or in the Hawaiian Departments. Recently, when it became necessary to provide two field hospitals for service at the veteran encampment at Gettysburg, the emergency had to be met by the transfer of Field Hospital No. 1 from Fort D. A. Russell, Wyo., and the organization of a second provisional hospital, de novo, from the Medical Department personnel of the Eastern Department. To get this in shape for service required about six weeks of time, even though its personnel was furnished by trained Hospital Corps men.

The tactical assignments of the four field hospitals and four ambulance companies are as follows: To the Second Division, one of each; to the Third Division, one of each; to the Cavalry Division, one of each; with troops in Philippine Islands, one of each.

It will thus be seen that the First Division has no field hospital or ambulance company attached to it or stationed within the limits of the territory which it occupies. When one of these organizations is needed for duty—as in the case of field hospitals for the Gettysburg encampment—the alternative is presented of organizing a provisional unit or of bringing one more than half way across the continent. In the instance under consideration it was necessary to do both. In passing, it might be remarked that in consequence of the Second Division having only one field hospital and one ambulance company of its own, the organizations belonging to the Cavalry Division had been made subject to the orders of the commanding general of the mobilized divisions, whose authority was obtained before it could be used for service in the Eastern Department. In other words, in consequence of the deficient number of such organizations a field

hospital belonging to one division is on duty with a second and is subject to the orders of the commanding general of a third. In the event of war, the unpreparedness of the Medical Department in this direction would be a matter of very serious moment and would invite disaster. This office desires to call attention to this, and to go on record as having done so, in order that it may be absolved from responsibility in the event of any breakdown due to a deficiency in the number of these important organizations.

I recommend that steps be taken with the least practicable delay to organize and equip two field hospitals and two ambulance companies for each of the tactical divisions and for the Philippine Department, and one of each of the organizations for the Hawaiian Department, and that the authorized strength of the Hospital Corps be increased by the number of noncommissioned officers and privates necessary to man the proposed organizations. I further recommend that such a procedure be considered as a preliminary and emergency measure, and that eventually each tactical division be provided with mobile sanitary units on the basis prescribed by Field Service Regulations.

In consideration of the special functions of the mobile organizations, there is required for duty with them a certain number of men having qualifications different from those generally required for Hospital Corps soldiers. I therefore recommend that there be allowed for each ambulance company 1 horseshoer at $30 per month, and 1 farrier, 1 saddler, and 15 wagoners, each at $21 per month; and for each field hospital 1 artificer and 8 wagoners, each at $21 per month.

Proposed Veterinary Corps.

One or more bills have been introduced in Congress during the last year to increase the efficiency of the veterinary service of the Army. This office has recommended that this service be organized as a corps and attached to the Medical Department, in a manner similar to the Nurse Corps and Hospital Corps. This is not proposed for the aggrandizement of the Medical Department, but because it is believed to be the only way in which that service can be raised to a fitting plane of dignity and efficiency such as it has reached in European countries and in the armies of the great military nations.

Veterinary medicine is a learned profession with a voluminous periodical and permanent literature of its own. The therapeutics and pharmacy of veterinary medicine are largely the same as for the medical service, and in Europe, where veterinary medicine has the dignity and standing of a learned profession, it has made valuable contributions to our knowledge of the causation of diseases. It is believed that it can not be placed on a high standard of efficiency without long-continued application of the same agencies which have raised the Medical Corps of the Army to its present high standard. This would not only conduce to the elevation and efficiency of the veterinary service, but would also be in the interest of economy, as all its supplies could be most advantageously purchased, cared for, and issued through the machinery of the Medical Department.

ARMY MEDICAL SCHOOL.

[Commandant, Col. Charles Richard, Medical Corps, United States Army; secretary, Maj. Carl R. Darnall, Medical Corps, United States Army.]

Col. Louis A. La Garde, Medical Corps, United States Army, was relieved as instructor in military surgery July 3, 1912, and as commandant October 1, 1912, by Col. Charles Richard, Medical Corps, United States Army.

The seventeenth session of the school began October 1, 1912, and ended May 31, 1913. The number of accepted candidates appointed in the Medical Reserve Corps and admitted to the school was 26. No student-candidate failed to pass the mid-term examination; 24 completed the course and qualified in the final examination; of this number 22 were recommended for commission in the Medical Corps of the Army, and 2 failed to receive such recommendation because of deficiency in aptitude for the military service; 2 failed to pass the final examination.

No officers of the Organized Militia were given permission to attend the course during the session.

The course of instruction has varied but little from that of last year. The following table shows the subjects taught, the number of hours devoted to each, names of the instructors, and the value of the several subjects.

No.	Subject.	Hours of instruction.	Professor.	Maximum.	Minimum.
1	Medical Department administration, duties of medical officers, and customs of the service.	96	Maj. Chas. R. Reynolds	1,000	800
2	Clinical microscopy and bacteriology.	268	Maj. F. F. Russell; assistants, Capt. C. F. Craig, Capt. H. J. Nichols.	900	720
3	Military hygiene	21	Lieut. Col. F. A. Winter	800	640
4	Military surgery	24	Col. Charles Richard	800	640
5	Military and tropical medicine	18	Lieut. Col. W. D. McCaw	800	640
6	Sanitary chemistry	150	Maj. C. R. Darnall	600	480
7	Hospital Corps drill	48	Capt. W. A. Wickline	500	400
8	Operative surgery	17	Capt. A. C. Christie	400	320
9	Opthalmology and optometry	43	Maj. P. S. Halloran; assistant, Capt. Wm. T. Davis.	400	320
10	Radiography	26	Capt. A. C. Christie	300	240

In addition to the above the following instruction was given: Series of eight lectures on military law by Maj. Blanton Winship, Medical Corps; a series of lectures and clinical demonstrations in psychiatrics at the Government Hospital for the Insane by Dr. J. S. White and Capt. Edgar King, Medical Corps; 22 hours in equitation at Fort Myer, Va.

The closing exercises were held in the lecture room of the school, at 10 o'clock a. m., Saturday, May 31, 1913. The graduating class was addressed by First Lieut. Charles W. Richardson, Medical

Reserve Corps, United States Army, of Washington, D. C. The diplomas were presented by the Hon. Henry S. Breckinridge, Assistant Secretary of War. The Sternberg medal, founded by First Lieut. Richard Slee, Medical Reserve Corps, United States Army, of Swiftwater, Pa., in honor of Brig. Gen. George M. Sternberg, United States Army, retired, to be awarded to the graduate officer with the best term record in practical knowledge of the subjects of bacteriology and serum therapy, was presented, with appropriate remarks, to First Lieut. George R. Callender, Medical Reserve Corps, United States Army, by Gen. Sternberg in person. Col. John Van R. Hoff, United States Army, retired, presented the Hoff memorial medal to First Lieut. Benjamin B. Warriner, Medical Reserve Corps, United States Army, who had the highest average received for the year.

The course in military surgery consisted of didactic lectures on gunshot, sword, saber, and bayonet wounds. It embraced the mechanics of projectiles; the different kinds of projectiles used in modern warfare, and the character of injuries produced by them; the action of explosives on tissues; the treatment of wounds in general and wounds of special parts; etiology, signs, symptoms, and treatment of traumatic aneurisms; and varieties of wounds produced by cutting and puncturing weapons, and their treatment. These lectures were illustrated by lantern slides, skiagraphs, and experimental gunshot wounds on the cadaver.

Sanitary chemistry, which was almost entirely a practical laboratory course, consisted of, first, qualitative analyses of the different groups of metals, with a view of refreshing the chemical knowledge of the student-candidates, and of familiarizing them in laboratory technique. Following this, the course consisted of examination of stomach contents, quantitative and qualitative examinations for the commoner poisons and alkaloids; chemical analysis of urine; chemical analysis of water; examination of air; the determination of the purity of pharmacopœal substances (the mineral salts, alcohol, chloroform, ether, calcium, magnesium sulphate, potassium bromide, potassium iodide, quinine sulphate, sodium salicylate), and examination of foods (flour, milk, butter, vinegar).

The course on bacteriology and clinical microscopy was expanded in several respects. Additional time was devoted by the class to the courses on syphilis and protozoology referred to in last year's report. The course in bacteriology and clinical diagnosis covered the standard work usually undertaken in post-graduate schools, and in addition included complete studies of cholera, typhoid fever, and plague. These subjects are not only important in themselves, but afford opportunity for the demonstration of the greater number of technical procedures of bacteriology and serology. In the study of typhoid and allied fevers, a course necessitating 12 working days was given, which included the isolation of the paratyphoid bacilli, as well as the typhoid, from blood, urine, and feces. The course in bubonic plague was more complete than has heretofore been given, and included the demonstration of acute lesions in freshly infected animals and tissues, and stained smears from natural infections in man and animals.

To illustrate actinomycosis a classical case was exhibited and from it the students prepared successfully stained smears and cultures. Rabies was illustrated with material from a fresh human case, as well as by typical symptoms and lesions in animals.

The subject of bacterial vaccines was studied during four working days. In addition to lectures and demonstrations on the immunity reactions involved, the therapeutic use of vaccines in various diseases was considered and each student prepared a staphylococcus vaccine.

At the conclusion of the course two weeks were devoted to the diseases caused by the anaërobic bacteria, and most of the methods which have been successfully used in the study of anaërobes were demonstrated to or were used by the class.

The first 16 hours of the course in opthalmology were devoted to theoretical instruction. The remaining 27 hours were made as practical as possible.

A series of interesting and very instructive lectures were delivered by special professors, session 1912–13, as follows: "Surgery of the bones," "Surgery of the brain," and "Cancer," by First Lieut. Roswell Park, Medical Reserve Corps, United States Army, of Buffalo, N. Y., three lectures; "The chronic arthritides," by First Lieut. Frank Billings, Medical Reserve Corps, United States Army, of Chicago, Ill., three lectures; "Surgery of the chest," by First Lieut. Samuel Lloyd, Medical Reserve Corps, United States Army, of New York, N. Y., four lectures; "Surgery of the bones and joints," by First Lieut. John B. Murphy, Medical Reserve Corps, United States Army, of Chicago, Ill., one lecture.

One officer of the Medical Corps, United States Army, attended the school during the session for a special course of instruction in serology and special bacteriology, preparatory to taking charge of one of the department laboratories. One medical officer of the Organized Militia took a special course of instruction in serodiagnosis, preparation of vaccines, etc. His work was highly satisfactory in all respects, and the experience gained will no doubt be of benefit to the military service of his State.

The Hospital Corps men (2 sergeants, first class, 1 sergeant, and 1 private) detailed at the school for instruction in X-ray work and photography, have proven apt and have acquired the technical knowledge and skill necessary to qualify them as instructors in these subjects.

Believing that the faculty of the school should be given titles commensurate with the character and importance of their duties, it was recommended, during the session, that titles of "instructor" and "assistant instructor," previously held, be changed to "professor" and "assistant professor," and that the distinguished members of the Medical Reserve Corps, detailed to deliver lectures upon professional subjects before the students of the school, be given the title of "special professor" for the session during which the lectures are delivered. This recommendation having been approved by the Secretary of War, the change was effected on January 25, 1913.

Relative proficiency of student candidates, Army Medical School, session 1912–13.

	Final rating.	Aggregate (maximum, 7,000; minimum, 5,600).	Remarks.
First lieutenants, Medical Reserve Corps:			
Clarence R. Bell	17	5,955	Proficient.
Raymond W. Bliss	15	6,004	Do.
William B. Borden	18	5,951	Do.
Raymond C. Bull	12	6,028	Do.
George R. Callender	3	6,303	Proficient with honor; Sternberg medalist.
Sidney L. Chappell	4	6,301	Proficient with honor.
Royal E. Cummings	19	5,924	Proficient.
Harry L. Dale	9	6,168	Do.
Bertram F. Duckwall	16	5,999	Do.
Robert H. Duenner	20	5,918	Do.
John S. C. Fielden, jr	23	5,850	Do.
Edward R. Guinan	21	5,903	Do.
Halbert P. Harris	22	5,852	Do.
William D. Herbert	7	6,227	Do.
Charles C. Hillman	6	6,230	Do.
Oliver Kinsey, jr	25	5,452	Not proficient.
Norman T. Kirk	13	6,018	Proficient.
George F. Lull	2	6,307	Proficient with honor.
Ernest C. McCulloch	11	6,126	Proficient.
Fletcher O. McFarland	10	6,141	Do.
John S. Saurman	24	5,729	Do.
Alvin W. Schoenleber	14	6,015	Do.
Stephen H. Smith	5	6,275	Do.
Benjamin B. Warriner	1	6,401	Proficient with honor: Hoff medalist.
Edward T. B. Weidner	8	6,183	Proficient.
Leon M. Wilbor	26	5,405	Not proficient.

SPECIAL WORK OF MEDICAL OFFICERS.

FLOOD RELIEF WORK, 1913.

During the disastrous flood which occurred in the Ohio and Mississippi Valleys, beginning in March, 1913, Maj. P. C. Fauntleroy, Medical Corps, was directed by the Secretary of War to proceed to Columbus, Ohio, and take charge of the medical relief work in Ohio. In compliance with this order Maj. Fauntleroy proceeded to Columbus and reported to the governor of Ohio. Owing to the delay caused by the great destruction of railroads he did not reach Columbus until March 30, having left Washington on March 26. The following medical officers were ordered to report to him for duty in connection with the relief work:

Maj. William T. Lyster.
Maj. Sandford H. Wadhams.
Maj. Paul C. Hutton.
Capt. George P. Peed.
Capt. John A. Clark.
Capt. John R. Bosley.
Capt. Arthur M. Whaley.
Capt. John S. Lambie.
Capt. Morrison C. Stayer.
First Lieut. Edward C. Register.

Ten noncommissioned officers and 40 privates of the Hospital Corps were also orderd to report to him at Columbus. Owing to the destruction of the railroads, only Maj. Wadhams and Capts. Clark and Bosley, and Lieut. Register, 2 noncommissioned officers, and 4 privates, Hospital Corps, were able to report to Maj. Fauntleroy at Columbus. The other officers and men reached Dayton and by order of the Secretary of War were put on duty with Maj. Rhoads, Medical Corps, as stated below. The following supplies were furnished Maj. Fauntleroy by the Medical Department for the relief work: Two field hospitals, reserve medical and surgical supplies sufficient for 20,000 men for one month, 10,000 vaccine points, sufficient antityphoid prophylactic to immunize 25,000 men, 10,000 units diphtheria antitoxin, and 60 cubic centimeters meningitis serum.

Upon arrival at Columbus, Maj. Fauntleroy was directed by the governor to confer with the authorities of the Ohio National Guard, and especially with Lieut. Col. Hall, surgeon general, Ohio National Guard. He also conferred with the city health officer and with the secretary of the State board of health. Much valuable information was obtained from these sources relative to prevailing epidemics, etc. Throughout his stay he continued to work in conjunction with the regularly constituted health authorities of the State. He reported:

From my conference with Lieut. Col. Hall I found that there was no reliable information as to the conditions in the valleys of the Miami, Scioto, Muskingum, and Ohio Rivers. Owing to the destruction of the means of communication the reports from the

flooded districts were mere hearsay rumors, and consequently the conditions were greatly exaggerated, especially as to loss of life and medical needs. I suggested to Lieut. Col. Hall that we should send medical officers at once to make medical surveys of these valleys and to report conditions and needs promptly in order that these could be met systematically and economically. From the State health officer I ascertained that widespread epidemics of smallpox, typhoid fever, and meningitis had been going on in the towns and cities along these rivers. Majs. P. C. Hutton, S. H. Wadhams, Capt. J. R. Bosley, and Lieut. E. C. Register, all of the Medical Corps, United States Army, were detailed for the purpose of making these medical surveys. These officers were supplied with the prophylactic vaccines and sera against the infectious diseases known to be in the districts they were about to visit. They were instructed to get in touch with the mayors, health officers, and local relief committees in the different municipalities; to work through them, ascertaining the conditions and medical needs of each locality, and offering their services in formulating systems of relief, and the prophylactics necessary to combat any epidemic diseases present or feared, also to promptly report to me the medical needs which they were unable to supply, the kind and quantity and the necessity therefor.

Lieut. Col. Hall, surgeon general, Ohio National Guard, detailed some of his medical officers forsimilar work, and with the same instructions. The work of all these medical officers was excellent, thorough, and expeditiously performed. In consequence, reliable information of the condition of the flooded districts began to arrive soon after their departure, and the needs of the people were satisfactorily met without undue waste. The needs reported were met either from the United States Army supplies, which I had at Columbus, or by purchase by Lieut. Col. Hall, or by the National Red Cross Association, in charge of Mr. Bicknel, or the Ohio flood relief committee. The correlating of these relief agencies in meeting the medical needs of the flooded districts as reported to me was done without any friction and enabled the work to be done with the utmost speed.

A field hospital was turned over to the surgeon general, Ohio National Guard, to be erected and operated by his officers at Portsmouth. Sufficient vaccine virus, antityphoid vaccine, and antimeningococcic were furnished to many places throughout Ohio to meet the immediate needs. Medical and surgical supplies were furnished wherever requested by the surgeon general, Ohio National Guard.

After completing the work of survey in Ohio, Majs. Hutton and Wadhams, and Capt. Bosley and Lieut. Register and three sergeants accompanied Maj. Normoyle down the Mississippi as far as Vicksburg for the purpose of doing similar work along that river. The remainder of the Medical Department personnel not needed elsewhere remained in Dayton.

The medical officers on duty with the troops from Columbus Barracks in the flooded section of the city cooperated with me and put into operation most satisfactorily the necessary sanitary measures to meet the conditions in the section under the supervision of Col. G. A. Dodd, United States Army. Too much can not be said in praise of the prompt, thorough, and continuous work done by Col. Dodd and his command in meeting the needs of the people of the flooded section of Columbus.

On April 24, Maj. Fauntleroy received a letter from the governor of Ohio, relieving him from duty with the relief work and expressing his appreciation of the services rendered by him and his assistants.

The Secretary of War, accompanied by the Chief of Staff and other officers from the War Department, visited Dayton, Ohio, on March 20, 1913, and while there directed Maj. Thomas L. Rhoads, Medical Corps, to take charge of the sanitary situation in the city under the following order:

The governor of Ohio having requested the Secretary of War to take charge of the sanitary situation in the city of Dayton, Ohio, and immediate vicinity, Maj. Thomas L. Rhoads is hereby designated as chief sanitary officer in charge of the conduct of the necessary work under the general instructions which are given him.

Maj. Rhoads divided the city into 16 sanitary districts and took charge of the relief work and cleaning up of the city, working in conjunction with the National Guard, Red Cross, and citizens' relief committee.

A relief camp was established by him on the fair grounds on March 31 and remained in operation until April 15, the average daily num-

ber of refugees at the camp being 208, the average daily number fed 262. As stated above, the medical officers on duty with Maj. Rhoads were: Maj. Paul C. Hutton, Capt. John A. Clark, Capt. George P. Peed, Capt. Arthur M. Whaley, Capt. John S. Lambie, jr., Capt. Morrison C. Stayer. There were also 7 sergeants, 3 corporals, and 36 privates of the Hospital Corps.

Maj. Rhoads performed his difficult and responsible duties with energy and efficiency. He was relieved on April 25.

THE CARE OF MEXICAN WOUNDED BY MEDICAL OFFICERS AND HOSPITAL CORPS MEN, UNITED STATES ARMY.

Maj. W. R. Eastman, Medical Corps, reported on December 28, 1912, that 22 Mexican Federals and 10 Mexican insurgents, wounded at Palomas, Mexico, November 21, 1912, were treated at Columbus, N. Mex., from November 23 to December 4, 1912, by him with the assistance of Capt. W. L. Hart, Medical Corps, Dr. Ellard (local practitioner), Sergt. Raymond, Hospital Corps, and six privates, first class, and privates, Hospital Corps. He stated that:

> The majority of the cases were fearfully infected. All the wounds were treated with tincture of iodin and through and through irrigations of weak solution of iodin and normal salt used whenever possible with external drainage. All improved under careful and tedious treatment, except Nos. 6 and 12, which were hopeless from the beginning.
>
> The 30 survivors were transferred, on December 4, 1912, by order of the commanding general, patrol district of El Paso, Fort Bliss, Tex., the Federals to the military hospital, Juarez, Mexico, and the rebels to the Hotel Dieu, El Paso, Tex.

The Mexican Federal forces on March 15, 1913, attacked the position of the insurgent forces on the hills 4 miles east of Naco, Mexico, about one-half mile from the international line. On April 8 and April 13, 1913, general attacks were made by the Mexican insurgents on the Federals occupying the town of Naco, Mexico. Maj. Louis Brechemin, Medical Corps, on April 5 notified the commanding officers of both forces that assistance would be furnished the wounded, if desired. Medical officers, Hospital Corps men, and hospital equipment from camps in the vicinity were assembled at Naco, Ariz., at the suggestion of Maj. Brechemin. A hospital was established on the first floor of the opera house in Naco, Ariz. Ambulances and searching parties were sent out after both attacks. Most of the wounded, however, were brought over either by American civilians, by Mexicans, or reached the hospital unassisted.

One hundred and fourteen wounded received assistance at the hospital established. Of this number 40 were Federals, 70 were insurgents, and in 4 cases the side was not stated.

Maj. Brechemin was assisted by Capt. Worthington, Lieuts. Van Kirk, and Ingold, Medical Corps, Dr. Randall of Douglas, Ariz., 2 other civilian physicians (names not given), 2 sergeants and 9 privates, and privates first class, Hospital Corps. Col. Guilfoyle, Ninth Cavalry, detailed extra men from the troops to assist at the hospital, and rendered assistance in every other way possible. The medical supplies, dressings, most of the bedding, and food for the patients while in hospital were supplied by the United States Government. Mr. Greenway and Dr. Ricketts, American civilians, donated 50 spring cots and several bales of quilts, as well as many other articles which could not otherwise be procured.

Maj. Brechemin says:

The work of the medical officers left nothing to be desired. They exercised splendid judgment and their surgical work was excellently performed. I desire to especially commend them for their zeal and energy and the way they took hold of the situation. The detachment of the Hospital Corps here is made up of men recently transferred from the line and some recruits. In spite of this fact their work was gratifying in the extreme. They were on duty long hours and the work was hard, but they took hold quickly and were alive to the situation. None of the patients were neglected for a single instant by the Hospital Corps men.

Six deaths occurred among the wounded treated. The wounded having been disposed of by turning them over to the proper authorities, the hospital was closed on April 23.

The following quotations from Maj. Brechemin's report is inserted, as a matter of general interest:

April 8: The insurgent forces made a general attack on Naco, Sonora, commencing at daylight. The firing was continuous and heavy. The Ninth Cavalry camp, notwithstanding the fact that it was protected by lines of loaded freight cars was under a heavy fire. One trooper was wounded in the shoulder by Mauser bullet and one teamster shot through wrist and thigh. The camp hospital, which had been placed in a small hollow behind cars, was subject to rifle fire and had to be vacated. The dressings and litters were removed to railroad embankment.

April 13: The attack commenced at 3.30 a. m., with heavy firing on both sides. The hospital was under fire and bullets struck the building but did no damage. At 4 a. m., wounded began to arrive at hospital brought in by patrols and machines belonging to Sheriff Wheeler and others. The first man to arrive at hospital was a Federal officer shot in the neck, followed by a lieutenant of the insurgent forces, who had been wounded in the thigh. A few minutes later a Yaqui came in severely wounded by a hand grenade. From then on the wounded came in a steady stream.

PLAGUE IN PORTO RICO.

When bubonic plague was reported in June, 1912, in San Juan, P. R., at the urgent request of the Chief of the Bureau of Insular Affairs, the Secretary of War issued an order for Lieut. Col. J. R. Kean as epidemilogical, and Maj. F. F. Russell as laboratory expert, with First Lieut. F. H. Foucar as assistant (all of the Medical Corps, United States Army), with the necessary assistant, to proceed to San Juan for special duty. The urgent necessity of limiting the spread of this epidemic by early, prompt, efficient measures was recognized. Lieut. Col. Kean reported in part as follows:

Having been authorized by the Secretary to take the necessary personnel and equipment to establish a plague laboratory, I sailed from New York June 22, accompanied by Maj. F. F. Russell and Lieut. F. H. Foucar, Medical Corps; three enlisted men of the Hospital Corps, and a regulation field laboratory outfit. We arrived June 27. We spent the 27th and 28th inspecting the localities where plague had appeared, and in observing the measures which were being put into operation for its suppression. There had been up to the time of our arrival 22 cases of human plague—

San Juan (old city)	2
Puerta de Tierra	16
Santurce	3
Caroline	1
	22

But little was known as to the distribution of the plague among the rat population until the plague laboratory had been a week in operation.

A building had already been selected and cleaned out for use as a laboratory, but the putting in of the water supply and especially the fly-proof screening which is essential in such dangerous work delayed its occupation until the 29th, when Maj. Russell moved in and immediately began work. A beginning in the examination of rats had been made by Dr. Gomez Martinez, chief of the laboratory of the sanitary

department, who up to the time of the establishment of Russell's plague laboratory had examined 284 rats, of which 15 were found infected. Unfortunately the importance of examination of all rats obtainable, in order to determine the degree of prevalence of the disease among them and its accurate distribution, was not appreciated, and only sample lots of those killed were furnished to the laboratory, and no spot map of those found infected was made. This neglect to send to the plague laboratory the bodies of rats caught and killed persisted to a considerable degree up to the time of our departure in spite of our efforts to impress upon the various officials of the sanitary department and the populace generally the importance of sending rats to the laboratory with tags marking the place where caught. This was true of the quarantine service also; of the large number of rats killed by fumigation on board vessels in the harbor very few reaching the laboratory.

A large number of rats were examined and much valuable information obtained relative to the distribution of the epidemic among the rodents. A sanitary survey of San Juan and the neighboring town was made by Lieut. Col. Kean. Daily conferences were held with the acting governor, the director of sanitation, and Dr. Creel, of the public health service. Dr. Creel, who had had experience in plague work in San Francisco, and who was well qualified to take charge of the special plague work, assumed charge after some days. The laboratory established by Maj. Russell, with its equipment, was turned over to Dr. Creel's assistants on July 9. The work then being well started, and there being no necessity for the medical officers to remain longer, they returned to their proper station. The anti-plague work was successfully completed by Dr. Creel.

WORK OF MAJ. CLYDE S. FORD, MEDICAL CORPS, AT CONSTANTINOPLE IN CONNECTION WITH THE AMERICAN RED CROSS DURING THE BALKAN WAR.

When the Balkan War began Maj. Ford was in Paris on sick leave. He left that city on November 1, 1912, for Constantinople, arriving there on November 4. He was immediately placed in charge by the American Red Cross of a field hospital which he improvised and organized in connection with the Turkish hospital. He assumed professional charge of two wards with 60 beds each, and three days after his arrival in Constantinople he began the professional care of 120 wounded Turkish soldiers.

On December 4, 1912, Maj. Ford was directed by the War Department to report to the American ambassador at Constantinople for such duty as he might direct, and upon the completion of the duty assigned to revert to his status of sick leave. He remained in charge of this hospital work until the latter part of the summer of 1913. He incidentally made an inspection of the cholera situation at San Stefano on November 18. As the result of this inspection he returned to San Stefano on November 23 with a small party under the direction of the American Red Cross and took charge of the sanitary work in a cholera camp containing about 600 sick soldiers. With the exception of a few days required in Constantinople to supervise the work which was under his direction there, he was occupied with this work in cholera camps until December 9, when it was formally turned over to the British Red Crescent Society. After two months of regular professional work, Maj. Ford then took charge of a very important piece of work, but one which he described as uninviting, plain, and inglorious. The work referred to was the establishing, financing, and operating of the general hospital laundry for a large Turkish hospital. He states that all the hospital linen from the

wards and storeroom had passed into a large and unspeakably dirty pile of some 15,000 pieces. As there was no one who seemed either able or inclined to relieve this unhappy and unsanitary state of affairs, he volunteered to assume charge of the work. This office has been informed through several sources of the unselfish and generous work performed voluntarily by Maj. Ford.

OBSERVATIONS BY MAJ. P. C. FAUNTLEROY, MEDICAL CORPS, UNITED STATES ARMY, IN THE BALKANS.

In accordance with the directions of the Secretary of War of November 23, 1912, Maj. P. C. Fauntleroy, Medical Corps, left Washington on November 24 for the seat of the war in the Balkans. He went to Vienna, thence to Sofia, Bulgaria. He made careful observations of the work of the medical department there, and then proceeded as near the field of actual hostilities as the authorities would allow him. After completing these observations he went to Constantinople, where the work of the Turkish medical department, with the Associated Red Crescent and Red Cross Societies, was carefully observed. Several very valuable and interesting reports giving in detail the results of his extended observations were furnished the War Department by him. He returned to Washington February 14, 1913.

STUDIES IN PELLAGRA.

Through the instrumentality of Dr. George N. Miller, then president of the New York Post-Graduate Medical School, funds were donated by Col. Robert M. Thompson, of New York City, and Mr. J. H. McFadden, of Philadelphia, to support a research expedition for the investigation of pellagra in the United States to be sent out under the auspices of the New York Post-Graduate School. Capt. J. F. Siler, Medical Corps, United States Army, was the representative of the Medical Corps of the Army on the commission which was formed. A field headquarters was established in the South at Spartanburg, S. C., early in June, 1912, and field studies were continued until October 15, 1912. Several hundred cases were very carefully studied and the statistics very carefully compiled. When the field service was discontinued the work of the regular commission was continued in the laboratories of the New York Post-Graduate Medical School. The report of "An Intensive Study of the Epidemiology of Pellagra" was published in the American Journal of Medical Sciences, June and July, 1913.

Additional funds have been donated, and further work will be done by the commission. Many valuable and interesting points in the epidemiology of this disease have been brought out by the commission.

FLOOD RELIEF WORK, 1912.

During the overflow of the Mississippi River in May and June, 1912, Maj. R. B. Miller and Capt. J. M. Coffin, Medical Corps, were detailed for duty with the relief force of the United States Army. Excellent work was done by both of these officers. A sanitary inspection for the Red Cross was made of the refugee camps, of the flooded region, by Lieut. Col. J. R. Kean, Medical Corps, under orders from the Secretary of War.

THE MILITARY SHOE—MUNSON.

A book on "The Soldier's Foot and the Military Shoe," by Maj. E. L. Munson, Medical Corps, with the approval of the War Department, was published in 1912. Maj. Munson was president of the Army Shoe Board, which conducted a series of experiments lasting over four years and included the critical study of the feet of some 2,000 soldiers, together with the fitting of many thousand shoes. This book embodies the experience of Maj. Munson himself and the shoe board. Its purpose is to supply practical information on the subject, and it should be carefully studied by all whose duties require them to either fit or supervise the fitting of shoes in the Army.

ARTICLES BY MEDICAL OFFICERS.

Articles by medical officers of the Army approved for publication by the Surgeon General's Office, July 1, 1912, to June 30, 1913.

Author.	Article.	Published in—
Ashburn, Maj. P. M.	See Board for the Study of Tropical Diseases.	
Ashford, Maj. Bailey K.	The economic aspect of hookworm disease in Porto Rico.	Read before the International Congress on Hygiene and Demography, September, 1912; printed in S. G. O. Bulletin No. 2.
	Control and eradication of hookworm disease.	Do.
	Remarks on the clinical study of uncinariasis and its treatment.	Medical Notes and Queries, 1913.
	Notes on sprue in Porto Rico and the results of treatment by yellow santonin.	Official organ of the American Society of Tropical Medicine.
Ashford, Capt. Mahlon	A study of the diagnosis tag	The Military Surgeon, October, 1912.
Banister, Lieut. Col. W. B.	The Medical Reserve Corps, its duties and relations to the Army in peace and war.	The Military Surgeon, March, 1913.
Bispham, Maj. W. N.	Report on a series of cases of pneumonia treated by vaccines.	The Military Surgeon, June, 1912.
Blanchard, Capt. R. M.	The use of heroin by soldiers	The Military Surgeon, 1913.
Bushnell, Col. Geo. E	Immunity through tuberculous infection	The Military Surgeon, January, 1913.
	Marginal sounds in the diagnosis of pulmonary tuberculosis.	New York Medical Record, 1912, Dec. 21.
Card, Capt. Daniel P.	Traumatic rupture of intestines; operation; recovery.	Military Surgeon, May, 1913.
Chamberlain, Maj. W. P.	Some features of the physiologic activity of Americans in the Philippines.	Read before the American Association of Tropical Medicine, Washington, May, 1913.
	The character of rice which prevents beriberi and the manner in which it it milled.	Do.
	Polished rice and beriberi	Boston Medical and Surgical Journal, 1913.
	See also Board for the Study of Tropical Diseases.	
Church, Maj. James Robb.	History of a supposed case of leontiasis ossium.	The Military Surgeon, 1912.
Clarke, First Lieut. Howard.	Medical service in the field	Publication not given.
Cole, Capt. Clarence L.	Typhoid fever perforation of a false diverticulum of the small intestine, about 18 inches above the cæcum. Early operation; recovery.	Journal of the American Medical Association, 1912.
Craig, Capt. Charles F.	The relation of parasitic ameba to disease	Read in a section of the International Congress on Hygiene and Demography. New Orleans Medical and Surgical Journal, July, 1912.
	The results of antityphoid vaccination in foreign armies.	Read before the International Congress on Hygiene and Demography and published in S. G. O. Bulletin No. 2.
	The present status of our knowledge regarding the parasitic ameba.	Read at the meeting of the Southern Medical Association at Jacksonville, Fla. November, 1912.

Articles by medical officers of the Army approved for publication by the Surgeon General's Office, July 1, 1912, to June 30, 1913—Continued.

Author.	Article.	Published in—
Craig, Capt. Charles F	The interpretations of the results of the Wassermann test.	Read before the District of Columbia Medical Society and published in the Journal of the American Medical Association, 1912.
	The identity of entameba histolytica and entameba tetragena.	Journal of the American Medical Association, 1913.
	The identity of entameba histolytica and entameba tetragena, with observations upon the morphology and life cycle of entameba histolytion.	Journal of Infectious Diseases, 1913.
	The prophylaxis and treatment of malarial affections.	International Clinics, 1913.
Culler, Capt. Robert M	Epididymotomy—A plea for rational treatment for epididymitis.	Journal of the American Medical Association, 1912.
Davidson, Maj. W. T	Notes on some tropical diseases encountered in Cuba and the Philippine Islands.	Bulletin of the El Paso County Medical Society.
	A case of spontaneous rupture of the malarial spleen; splenectomy.	Texas State Journal of Medicine, 1913.
De Loffre, Capt. Samuel M	Specializing in the Medical Corps, with special reference to obstetrics and gynecology.	Military Surgeon, 1913.
Duncan, Capt. Louis C	The Medical Department of the United States Army in the Civil War "When Sherman marched down to the sea."	Military Surgeon, August, 1912.
	The great battle of West, Chickamauga	Military Surgeon, October, 1912.
	Pope's Virginia campaign	Military Surgeon, January, 1913.
	The death of McPherson	The Military Surgeon, 1913.
	The bloodiest day in American history; Antietam.	Military Surgeon, May, 1913.
	The campaign of Fredericksburg	Military Surgeon, July, 1913.
	The use of motor vehicles in transporting wounded.	Journal of the Military Service Institute, 1913.
	Evolution of the Ambulance Corps and field hospital.	Military Surgeon, March, 1913.
Eckels, First Lieut. Lauren S.	Epididymotomy	Journal of the American Medical Association, 1913.
Fauntleroy, Maj. P. C	Notes on the Turko-Balkan War	Publication not known.
Ford, Maj. J. H	The disposal of wastes	Read before Fifteenth International Congress on Hygiene and Demography; published in S. G. O. Bulletin No. 2.
	Notes on organization and equipment for evacuation of the wounded.	Military Surgeon, December, 1912.
Foster, First Lieut. Geo. B	Division field laboratory; its possibilities as illustrated by experience with the maneuver division.	Military Surgeon, October, 1912.
	Antityphoid vaccination.	
	The Noguchi leutin reaction in syphilis	Journal of the American Medical Association, 1913.
Fox, First Lieut. L. Webster	Ocular diseases incidental to advanced life, considered in connection with claims for pensions.	Military Surgeon, September, 1912.
French, First Lieut. Sanford W.	Some suggestions for a modified iodine container.	Military Surgeon, July, 1912.
Gentry, First Lieut. Ernest R.	(See Board for the Study of Tropical Diseases.)	
Goldwaite, First Lieut. R. H.	Salvarsan and malaria	Military Surgeon, October, 1912.
Hartsock, Maj. F. M	The management of gonorrheal rheumatism.	Read before the Michigan State Medical Society, 1912.
Howard, Maj. Deane C	The prevention of venereal diseases	Read before the Fifteenth International Congress on Hygiene and Demography, published in S. G. O. Bulletin No. 2.
Jones, Capt. Harold W	Depressed fracture; dislocation of the malar bone; report of a case with operative treatment.	Military Surgeon, 1913.
	A study of recruits according to Pignet's factor.	Do.
Jones, Capt. Percy L	Disposal of garbage in barracks	Military Surgeon, October, 1912.
Kilbourne, Capt. E. D	A report of 600 cases of measles occurring at Columbus Barracks, Ohio.	Military Surgeon, September, 1912.
Lake, First Lieut. Geo. B	The treatment of infantile convulsions	New York Medical Journal, 1912.
Leary, First Lieut. T. J	A surgical method of clearing up chronic typhoid carriers.	Journal of the American Medical Association, 1913.

Articles by medical officers of the Army approved for publication by the Surgeon General's Office, July 1, 1912, to June 30, 1913—Continued.

Author.	Article.	Published in—
Love, Capt. Albert G.	Typhoid prophylaxis in the British Army in India and in the American Army in the United States.	Military Surgeon, March, 1913.
	Some of the history of the annual report of the Surgeon General, with extracts.	Military Surgeon, April, 1913.
Lyster, Maj. T. C.	The military importance of deviations of the nasal septum.	Military Surgeon, 1912.
Maddux, First Lieut. H. C.	Hospital treatment of acute gonorrhea	Military Surgeon, 1913.
Munson, Maj. E. L.	The Soldier's Foot and the Military Shoe (book).	Printed by the United States Cavalry Association, Fort Leavenworth, Kans., 1912.
	Gaseous disinfection of equipment in the field.	Read before the Fifteenth International Congress on Hygiene and Demography, and published in S. G. O. Bulletin No. 2; also published in Military Surgeon, February, 1913.
	The influence of certain camp epidemics upon the geographical expansion, political history, and military policy of the United States.	Military Surgeon, November, 1912.
Nichols, Capt. H. J.	Medical work in the Army	Yale Review, 1912.
	The demonstration of spirochaeta pallida in the cerebral spinal fluid of a case of nervous relapse following the use of salvarsan. (Collaborated with Dr. Hough).	Journal of the American Medical Association, January, 1913.
	Positive results following the inoculation of the rabbit with paretic brain substance; a preliminary note.	Journal of the American Medical Association, 1913.
Patterson, Maj. Robert U.	A straddle trench cover	Military Surgeon, June, 1913.
Pierson, Capt. R. H.	The relation of medical officers to military discipline.	Do.
Pillsbury, Capt. H. C.	Cases of cerebrospinal meningitis observed at Jefferson Barracks.	Military Surgeon, July, 1913.
Porter, Capt. R. S.	Prompt response to treatment by subcutaneous injection of blood serum in case of melæna neonatorum.	Military Surgeon, 1912.
Reasoner, Capt. M. A.	Provocative reaction in syphilis	Read before the San Diego County Medical Society.
Reno, Maj. Wm. W.	A new travois; a plea for its addition to the equipment of ambulance companies.	Military Surgeon, December, 1912.
	A proposed method of pitching or striking a field hospital rapidly.	Military Surgeon, April, 1913.
Russell, Maj. F. F.	Antityphoid vaccination	Published in the Proceedings of the Harvey Society, 1913.
	Antityphoid vaccination in children	Journal of the American Medical Association, 1912.
	Progress in antityphoid vaccination during 1912.	Journal of the American Medical Association, 1913.
Schmitter, Capt. F.	The leutin test	Publication not given, 1913.
Shockley, Maj. M. A. W.	A simple marker set for the solution of medical field problems.	Military Surgeon, September, 1912.
Skinner, Maj. Geo. A.	Gunshot fracture of both bones of the forearm; recovery.	Do.
Slee, Lieut. Richard, M. R. C.	Connecticut manœuvers	The American Journal of Clinical Medicine, January, 1913.
Stallman, First Lieut. Geo. P., M. R. C., U. S. A.	Ants destroying larvæ of flies	Military Surgeon, September, 1912.
Tropical Diseases, Board for the Study of.	Report for quarter ending Dec. 31, 1911	Military Surgeon, August, 1912.
	Report for quarter ending Mar. 31, 1912	Military Surgeon, October, 1912.
Van Poole, Maj. G. M.	A case of quinine idiosyncrasy	Read at the annual meeting of the Association of Military Surgeons, 1913; published in Military Surgeon, February, 1913.
Vedder, Capt. Edward B.	History of Beriberi (book); (see also Board for the Study of Tropical Diseases).	1913.
Wadhams, Maj. S. H.	Report on three cases of amebic dysentery treated with salvarsan.	Journal of the American Medical Association, 1913.
	Results of treatment of syphilis with salvarsan and neosalvarsan.	Do.
Whitmore, Maj. Eugene R.	Pathogenic ameba	Read in abstract before meeting of American Association of Tropical Medicine at Washington, May, 1913; published in proceedings and in official organ of the society.

Articles by medical officers of the Army approved for publication by the Surgeon General's Office, July 1, 1912, to June 30, 1913—Continued.

Author.	Article.	Published in—
Wilde, First Lieut. A. G....	Post anesthetic nausea.....	Military Surgeon, 1913.
	Iodine idiosyncrasy.....	Do.
Wilson, Maj. Wm. H.....	Prophylaxis in the Army.....	Read before Maine State Medical Society, May, 1913.
Winter, Lieut. Col. Francis A.	Preparedness of the Medical Department of the Army in the matter of field medical supplies.	Read before the class at the Army War College and published in the Military Surgeon, January, 1913.

BULLETINS.

In the sundry civil bill for 1913, under the appropriation for printing and binding for the War Department, it was provided—

That the sum of $3,000, or so much thereof as may be necessary, may be used for the publication from time to time of bulletins prepared under the direction of the Surgeon General of the Army for the instruction of medical officers when approved by the Secretary of War.

It is hoped that this appropriation will be continued from year to year in the future. It is intended that these bulletins shall be used for the publication to the Medical Corps of the special technical work of the service laboratories, the reports of the boards for the study of tropical diseases, and other work of medical officers which is of too special or technical a character to make it acceptable for publication in the medical journals and the Military Surgeon.

From this time on the bulletin will be published, if possible, at least quarterly. Officers of the corps are requested to submit suitable original articles to this office for use in the bulletin, with the understanding that they may be published elsewhere by the author if found not suitable for the bulletin.

The three following bulletins have been published:

No. 1.—Photomicrographs of Spirochetae, Entamebae, Plasmodia, Trypanosomes, Leishmania, Negri Bodies, and Parasitic Helminths.

No. 2.—Papers by Officers of the Medical Corps, U. S. Army, read before the Fifteenth International Congress on Hygiene and Demography.

No. 3.—Studies of Syphilis, by Capt. Charles F. Craig, and Capt. Henry J. Nichols, Medical Corps, United States Army, with introduction by Maj. Frederick F. Russell, Medical Corps, United States Army.

REPRESENTATION OF THE MEDICAL DEPARTMENT OF THE ARMY AT MEETINGS OF NATIONAL AND INTERNATIONAL MEDICAL CONGRESSES, ETC.

The act approved March 4, 1913, making appropriation to supply deficiencies in the apporpriations for the fiscal year 1913 contained the following provision:

* * * Hereafter the Executive shall not extend or accept any invitation to participate in any international congress, conference, or like event, without first having specific authority of law to do so.

Also in the act for the support of the Government of the District of Columbia for the fiscal year 1913 was inserted a general provision as follows:

SEC. 8. No money appropriated by this or any other act shall be expended for membership fees or dues of any officer or employee of the United States or of the District of Columbia in any society or association or for expenses of attendnace of any person at any meeting or convention of members of any society or association, unless such fees, dues, or expenses are authorized to be paid by specific appropriations for such purposes or are provided for in express terms in some general appropriation.

This latter provision was subsequently revoked so far as it affected the appropriation for the fiscal year 1913, but it is the understanding of this office that it still holds good for future appropriations.

Since July 1 of this year these two enactments have effectually put a stop to participation on the part of the Medical Corps of the Army in the valuable activities represented by the American Medical Association and other national organizations as well as international bodies.

International congresses which cover the whole medical field and others covering certain specialties have greatly multiplied during recent years, and are recognized as exercising a powerful influence on the progress of the medical sciences and the adoption of perfected methods; also the influence upon the individual physicians attending them is equally salutary and broadening. It has been the well-settled policy of the War Department to send representatives of the Medical Department of the Army to the meetings of the important national associations, such as the American Medical Association, the American Public Health Association, and the Association of Military Surgeons, as it is considered very important that its officers shall be well known and influential among their professional brethren in this country, and that their high professional standing shall exert an influence in attracting the best class of medical graduates to the service. Representation at the meetings of the Association of Military Surgeons is of peculiar importance on account of the opportunities given to influence and instruct the officers of the Organized Militia.

For these reasons it has been recommended by this office that steps be taken to secure from Congress specific authority for the Executive to send representatives of the War Department to national and international congresses in which he deems it desirable that the Medical Department should be represented, and to pay from the mileage appropriations the actual expenses incurred by delegates to international congresses. It has also been recommended that section 8 of the act for the support of the government of the District of Columbia for the fiscal year 1913 (above quoted) be repealed so far as it affects the Medical Department of the Army.

SANITARY TROOPS OF THE ORGANIZED MILITIA.

The following is an extract from a report furnished this office by Maj. Harry L. Gilchrist, Medical Corps, United States Army, detailed for duty in the office of the chief, Division Militia Affairs, War Department:

While there has been some improvement in the efficiency of the sanitary troops of the Organized Militia during the past year, yet this improvement has not been as grea

nor as general as is desired, and as essential to securing real efficiency. The principal causes of the present unsatisfactory condition are lack of proper equipment, of suitable instructors, of proper support and encouragement on the part of the State authorities, and to some extent inefficient personnel in the Medical Department itself of the Organized Militia. As to these different causes it may be said that a large part of the equipment now on hand is either obsolete or worn out; that there are no inspector-instructors of the Regular Army on duty with the Medical Department of the Organized Militia, as is the case in all other branches of the service; that there is great reluctance on the part of State adjutants general to make requisition for modern equipment in sufficient quantities; that a part of the personnel, not knowing the real duties of this branch of the service in the field, fail to realize the character and amount of training necessary, and consequently tolerate many men who, while they may be efficient practitioners in civil life, are entirely ignorant of their duties in the field. The entire matter may be summed up by saying that there is still a generally prevalent idea that a medical officer is merely a doctor practicing his profession under possibly different conditions in the field from those obtaining in civil life, but that there is no substantial difference in the character of his work. That the practice of medicine is only a small part of his duties is by no means generally recognized either by State authorities or by a large number of the medical officers themselves, and consequently no material improvement can be looked for until a more correct conception of the duties of medical officers and sanitary troops in the field is obtained. The best method of establishing correct ideas on the subject is, according to the chief, Division of Militia Affairs, to detail medical officers of the Regular Army as inspector-instructors of the Organized Militia, as is done in the case of other arms. In this recommendation the Surgeon General concurs and his office will do everything within its power to assist in carrying out this idea. The presence of these officers continuously with the Organized Militia will serve to disseminate correct ideas as to field duty, would show the necessity of proper and adequate equipment, will standardize instruction generally, and will secure true progress.

Inasmuch as the organization and instruction of the sanitary troops in the different States are left entirely to State administration, few have adopted the same plan or routine in the matter, and as a result all have separate and distinct forms. This results in many different varieties of medical organizations, some good, others poor. In some the commissioned officers are appointed by the regimental officers, the only requirement being an acceptable personality; in other States commissioned officers are only appointed after having successfully passed rigid examinations. In some States the commissioned personnel is entirely too large for the number of troops in the State, but in the majority of the States the enlisted personnel is much too small. To overcome some of these objections the Division of Militia Affairs has prepared a plan of organization for the medical departments of the Organized Militia which corresponds as nearly as possible with the act governing the organization of the medical establishment of the Regular Army. A plan of instruction has also been worked out for the sanitary troops of the Organized Militia which is along the lines followed by similar troops in the regular establishment. The scheme of instruction is quite complete and covers all subjects the commissioned officer and the enlisted man of the medical department should be familiar with. The course for officers is of a four years' duration. For the enlisted men a two years' course has been prepared.

The strength of the sanitary troops of the Organized Militia, as shown by the annual inspections in 1913, is shown in the table below.

Heretofore the number of enlisted men in the Hospital Corps in the majority of the States has been far below the minimum requirements, and no efforts were made to keep this branch of the military service up to the standard. In Circular No. 8, War Department, Division of Militia Affairs, August 1, 1913, provisions have been made to accomplish this purpose. Hereafter States that have medical organizations will be obliged to keep their sanitary personnel up to meet the legal requirements. A maximum number has been prescribed for each regiment, battalion, field hospital, and ambulance company, which will be strictly adhered to.

An effort is also being made to have regimental infirmaries with all regiments, these infirmaries to be complete in all respects and all obsolete and worn-out property replaced by new.

Number of the sanitary personnel and units in the Organized Militia on June 30, 1912, and June 30, 1913.

	Medical officers.		Enlisted men.		Field hospitals.		Ambulance companies.		Detachments Hospital Corps.	
	1912	1913	1912	1913	1912	1913	1912	1913	1912	1913
Alabama	11	11	35	12					3	1
Arizona	4	4	1	10						1
Arkansas	17	15	21	25						1
California	18	24	55	121		1		1	6	6
Colorado[1]	11	12	31	29					2	2
Connecticut	21	18	69	102	1	1	1	1	2	2
Delaware	2	3	10	8					1	1
Florida	10	9	25	20					1	1
Georgia[1]	19	17	46	33					6	5
Idaho	7	4	21	20					1	1
Illinois[1]	49	51	167	158					10	10
Indiana	20	19	95	115	1	1	1	1	2	2
Iowa	20	12	87	77	1	1			4	4
Kansas	7	7	24	21					1	1
Kentucky	17	17	33	48	1	1				1
Louisiana	10	2	36	22					1	1
Maine	9	9	48	41					2	2
Maryland	17	16	35	32		1			1	
Massachusetts	39	44	123	146	1	1	1	1		11
Michigan	23	12	119	132	1	1	2	2		
Minnesota	17	17	35	35					4	4
Mississippi	10	12	28	16	1	1				
Missouri	28	17	48	69	1	1	2	1		3
Montana	4	4	19	24					1	2
Nebraska	16	20	38	26	1	1				
Nevada										
New Hampshire	8	7	43	29					2	2
New Jersey	30	31	93	112	1	1			5	8
New Mexico	10	3	18	10					2	2
New York	100	110	438	579	2	2	3	3	28	31
North Carolina	18	22	102	98	1	1	1	1	2	2
North Dakota	5	4	23	24					1	1
Ohio	52	48	197	239	2	2	2	2		4
Oklahoma	4	2	31	28	1	1				
Oregon	15	12	42	38			1	1		1
Pennsylvania[1]	58	59	136	147					13	13
Rhode Island	10	10	39	32	1	1				1
South Carolina	13	4	47	36					3	1
South Dakota	6	6	8	(?)						
Tennessee	17	12	90	95	1	1	1	1	3	4
Texas[1]	15	4	(?)	38						(?)
Utah	4	1	10	10					1	1
Vermont	3	4	24	18					1	1
Virginia	15	17	42	59					6	7
Washington[1]	6	7	30	23					1	1
West Virginia	7	8	23	25					1	1
Wisconsin	14	12	42	43					3	3
Wyoming	4	4	11	21					3	4
District of Columbia[1]	11	13	40	48					1	1
Hawaii	3	3	16	10					1	1
Total	834	779	2,794	3,104	18	20	15	15	125	154

[1] States to which field hospitals have been issued and are now being organized.

CONSTRUCTION AND REPAIR OF HOSPITALS.

During the past year plans and specifications were prepared and contracts were entered into for the construction of isolation wards at Fort Bliss, Tex., Fort Oglethorpe, Ga., and Fort Totten, N. Y.; dormitories at the Army and Navy General Hospital, Hot Springs, Ark., and the Letterman General Hospital, San Francisco, Cal., for the Army Nurse Corps; a hydrotherapeutic plant and an additional ward at the Walter Reed General Hospital, Takoma Park, D. C.; a hydrotherapeutic ward, a sterilizing and disinfecting building, and an addition to the detention ward at the Letterman General Hospital, San Francisco, Cal.; and additional wards to the hospitals at Fort Bliss, Tex., Fort Huachuca, Ariz., and Fort Shafter, Hawaii; and for additions and improvements to the hospitals at Fort H. G. Wright, N. Y., Fort Monroe, Va., Fort Sill, Okla., and Fort D. A. Russell, Wyo. A small temporary hospital was also erected at Camp Yosemite, Cal.

Two sets of plans and specifications were prepared for an isolation ward at Fort Benjamin Harrison, Ind. Proposals were invited, but all bids received were largely in excess of the amount available for such a building and had to be rejected. It appears that the location of this post renders it impossible to erect a suitable isolation ward for the limited sum of $20,000 fixed by section 1136, Revised Statutes.

The following buildings which were contracted for during the fiscal year ending June 30, 1912, have been completed: Isolation wards at Fort D. A. Russell, Wyo., and Fort Sheridan, Ill.; additions to the main hospital building at the Walter Reed General Hospital, Takoma Park, D. C., Fort Monroe, Va., the Letterman General Hospital, San Francisco, Cal., the Presidio of Monterey, Cal., Fort Sill, Okla., Fort Shafter, Hawaii, and at Fort Yellowstone, Wyo.; and an addition to the dormitory at the Army Nurse Corps, Walter Reed General Hospital, Takoma Park, D. C.

An allotment of $60,000 was made from the appropriation for construction and repair of hospitals for use in the Philippines Department during the fiscal year, and $2,000 from the appropriation for quarters for sergeants, first class, Hospital Corps, to cover the cost of quarters for these noncommissioned officers in the Philippines.

In addition to the foregoing the Army general hospitals and the hospitals at military posts were improved or kept in proper repair so far as funds would permit.

New hospital buildings are required at numerous military posts to replace old and dilapidated structures which have been in use for many years and which require large sums of money annually for repairs and improvements. New structures of modern type would be economical, but it is impossible to erect a suitable modern military hospital for the maximum sum allowed by law from the general appropriation for such purposes. Section 1136, Revised Statutes of the United States, limits the cost of permanent structures to $20,000, unless special authority is first obtained from Congress.

This law was enacted in 1853, when material and labor were much lower in price than they are at present. The statute should be modified to suit present conditions.

The Army and Navy General Hospital, Hot Springs, Ark., needs additional buildings and grounds to meet the increased demands being made for accommodations. While the Army has increased and the demands for admissions to this hospital have grown materially, no increase has been made in years in buildings for the care of patients until now the problem of providing for applicants is becoming serious. The lack of accommodations for discharged soldiers who are entitled to be admitted to this hospital was severely felt during last fall and winter. It was impossible to care for all those entitled who desired to avail themselves of the benefit of the treatment at this institution except by curtailing the period of treatment of those already admitted, and many were obliged to wait for longer or shorter periods until vacant beds became available. The number of persons applying for permit to enter during 1912 shows an increase of 34 per cent over 1911. Sufficient accommodations should be provided so that those who are entitled to enter can be permitted to remain until they have received all possible benefit of treatment there. Even after funds are provided, several years must elapse before the improvements can be completed. The additional wards, messing facilities, other necessary buildings, roads, walks, etc., is estimated to cost $420,000, apportioned as follows:

Officers' hospital, with one 18-bed ward, 18 private rooms, operating room, baths, all equipment, and furniture	$100,000
Three-story ward, for veterans	60,000
Additional story to wards Nos. 1 and 2	40,000
Post exchange with a gymnasium, bowling alleys, shower baths, and amusement halls	40,000
Hospital Corps barracks	40,000
Three double sets noncommissioned officers' quarters	30,000
Increasing size of bathhouse, renovating and equipping same	50,000
Lowering the elevator shaft in ward 3 to level of bathhouse, constructing passage between two buildings and installing electric elevator	8,000
Increasing size of stables	7,000
Storehouse for quartermaster and medical supplies	20,000
Refrigerating plant for cooling hot water for bathing	15,000
Roads, walks, and grading	10,000
Total	420,000

The additions most urgently needed are the officers' hospital, and the Hospital Corps barracks, which should be provided even if the capacity of the hospital be not increased as recommended.

Items for improving this hospital were included in the annual estimates from this office for 1913 and 1914, but were eliminated by order of the Secretary of War.

As stated in the last report new and modern hospitals should be erected at the following military posts in the near future:

Fort McPherson, Ga.—The hospital at this post is in size entirely inadequate. It is located in close proximity to a railroad and has no cellar except a small excavation for a heating apparatus, which was made some years after the building was erected. The heating and ventilation are not suitable for a modern hospital. The plumbing is crude, and efforts have been made from time to time to improve it,

but it falls far short of meeting the modern sanitary requirements. The operating room is located in a small annex, with a small laboratory adjoining. There is no instrument room, etherizing room, preparation rooms, nor surgical ward. There is no suitable ward for the isolation of contagious diseases nor prison ward, and the Hospital Corps detachment is quartered in an old temporary wooden building which was erected for use as a ward during the Spanish-American War. The mess room and kitchen are too small, and are unsuited for their purpose, it being necessary to set tables two or three times to accommodate the patients. The entire hospital is such, that it would be in the interest of economy to replace it with a modern structure. A hospital should be erected of capacity of 87 beds for patients and the necessary attendants. The estimated cost of such a building is $90,000.

Post of Washington Barracks, D. C.—A hospital was erected at this station in 1893. This became a general hospital in 1898, and was abandoned as such upon completion of the Walter Reed General Hospital in 1909. It is to be torn down to secure room to complete a barrack building, which is now partly erected. Some provision should be made for sick call, administrative purposes, and for the temporary care of the sick at this post. A central infirmary, with one small ward, a receiving room, office, etc., to care for the sick until such time as the patients can be moved to the Walter Reed General Hospital will answer the purpose. Such a building, in keeping with the architectural appearance of other buildings at the post, is estimated to cost $25,000.

Fort Hamilton, N. Y.—In 1904 the commanding officer of this post stated that the present hospital was entirely inadequate for the needs of the garrison; that there was insufficient space for attendants; that there was no isolation ward nor prison ward, and that in the rearrangement of the post a better site had been selected. In 1906 the chief surgeon, Department of the East, stated that the hospital was very badly located, standing on rather low ground facing at a distance of 14 yards a noisy public highway, on the other side of which were saloons and other objectionable places of public resort. In view of these circumstances, the interests of the service will best be subserved by erecting a modern hospital on a more appropriate site, especially as it is proposed to use the present building for a band barrack. A hospital of sufficient capacity for this post should contain 60 beds for patients and suitable accommodations for attendants, noncommissioned officers, etc. The estimated cost of such a building is $60,000.

Fort Dade, Fla.—It is understood that this is intended to become the main post in an artillery district. The present hospital is entirely inadequate and unsuitable. It is a temporary structure, with crude plumbing, lacks modern appliances, and the conditions are such that they can only be remedied by the erection of a new and modern hospital. In 1910 the Secretary of War approved a recommendation of the Chief of Coast Artillery, that a new hospital be erected at this post. A suitable structure is estimated to cost $30,000.

Presidio of San Francisco, Cal.—The old hospital at this post, with the exception of a small portion used as a dispensary, has not

been occupied since 1905. It was erected during the Civil War, has been unsuitable for hospital purposes for years, and is not properly located for use as a dispensary. A modern dispensary building is desired at this post, in a suitable location. It is recommended that the old hospital be abandoned and that those requiring hospital treatment be sent, as at present, to the Letterman General Hospital. It would require a large expenditure of funds to modernize the old hospital and render it suitable for modern hospital purposes, and it would be more economical to erect a new building. A suitable dispensary is estimated to cost $25,000.

Fort Benjamin Harrison, Ind.—One ward wing and the administration building of a modern hospital have been erected at this post, but the building has not been completed. It lacks one ward wing and a rear annex. It is insufficient in capacity, and in March, 1909, the surgeon recommended that the hospital accommodations at this post be doubled. The chief surgeon, Department of the Lakes, stated:

> It is important that the hospital at Fort Benjamin Harrison be completed at an early date, as the hospital facilities are inadequate even for the regular garrison, and are entirely so when the post is used as a base for the maneuver camp. One wing and the annex are yet lacking, and in fact less than half of the hospital has been completed.

The department commander stated that this hospital should be completed by adding another wing and the rear annex required for the standard plan for a 60-bed hospital. To complete this building in the manner recommended is estimated to cost $40,000.

Fort Crook, Nebr.—The hospital at this post is inadequate. It lacks a suitable kitchen, mess room, Hospital Corps dormitory, prison ward, isolation ward, etc. It is purposed to add a rear annex to contain these rooms, thus relieving the administration building, and providing more room for patients, clerical work, etc. The estimated cost of a rear annex is $25,000.

Fort Des Moines, Iowa.—The hospital at this post has never been completed, and is inadequate. The administration building and one ward wing of the standard plan were erected. It lacks one ward wing and the rear annex. To complete this hospital by adding another ward wing and a rear annex is estimated to cost $40,000.

Fort Missoula, Mont.—The administration building and one ward wing of a new hospital have been completed at this post, but another ward wing and a rear annex are required to complete the building and to supply accommodations for a regimental post. To complete this hospital the estimated cost is $40,000.

Fort Niagara, N. Y.—The hospital at this post has 13 beds. The garrison is to consist of 8 companies of Infantry. This will require hospital accommodations for 32 patients, 15 Hospital Corps privates, and 4 noncommissioned officers. It is proposed to enlarge this hospital by adding another ward for 12 beds, and a rear annex to contain kitchen, mess hall, Hospital Corps dormitory, prison ward, isolation ward, etc. The estimated cost of these improvements is $35,000.

Fort Terry, N. Y.—The hospital at this post is inadequate, and in 1910 the surgeon recommended the erection of a rear annex. This hospital was erected in 1900 and contained 12 beds. In 1910 a

second story was added to the ward, thus doubling the bed capacity. A larger kitchen, mess room, etc., are necessary. There is no isolation ward, prison ward, hospital corps dormitory, etc., and the desire is to add a rear annex to the hospital, containing the necessary rooms, and relieving the administration building. The estimated cost of a suitable building is $25,000.

Hawaiian Islands.—A large division hospital of not less than 300 beds will be needed in or near Honolulu for the proposed division of troops which is to be in garrison there. It would be better and in the end more economical to construct this hospital new throughout, but from motives of economy it was decided to expand a small wooden hospital at Fort Shafter which has been done by the erection of three pavilion wards, enlarging the mess room and erecting a new kitchen. These wards increase the capacity by 60 beds, but no provision has been made for attendants, etc. In the opinion of this office accommodations should be provided for 100 additional patients, 52 Hospital Corps privates, 13 noncommissioned officers, modern operating rooms, isolation wards, etc. On account of the high cost of material and skilled labor the cost of such building is estimated at $120,000.

General Hospital, Fort Bayard, N. Mex.—Authority was given to erect three additional ward buildings for this general hospital, but it was possible to enter into contract for the erection of only two of these wards. To erect the third ward building $50,000 is needed.

Seacoast Artillery posts.—Owing to the increase in the Coast Artillery and the concentration of companies at various posts, it is necessary to increase the hospital accommodations by enlarging the buildings. Such has been done at several posts, but it is estimated that $100,000 will be required to complete the work.

Isolation wards.—Eighteen of these wards have been authorized, of which 13 have been completed, 4 are in course of erection, and 1 is to be contracted for. These buildings are absolutely necessary at large military posts, but it has not been possible to secure funds for more than three during any one year. It is essential to good sanitary administration in the Army that this policy be continued, and that provision be made promptly for the erection of isolation wards at military posts with a garrison of a regiment or more. At least 10 more of these wards will be necessary. At the rate of 3 in each year it will require over three years to supply the most important posts. These wards are for patients suffering from infectious diseases, and for those under observation until the diagnosis is determined. They contain in addition to beds for patients, dressing rooms, toilet rooms, nurses' rooms, diet kitchens, a mortuary, and a complete disinfecting plant where needed.

Quarters for sergeants, first class, Hospital Corps.—Owing to the limited appropriation for these buildings, it was not possible to erect additional quarters. A number of large military posts are in need of quarters for these noncommissioned officers, and the appropriation should be liberal until such time as the sergeants, first class, Hospital Corps are supplied with suitable habitations. The Philippine Department is in need of funds for this purpose, $12,000 being requested by the department commander, but it was possible to supply only $2,000. All the quarters at military posts already established and occupied have been repaired, improved, and kept in good condition so far as the limited appropriation would permit.

The Army Medical School occupies a rented building in this city. As it is one of the permanent service schools it would be much more economical, as well as more fitting and convenient, for it to be housed in buildings erected by the Government. It is proposed to erect these on a tract of land occupied by the Walter Reed General Hospital, so that the students may have the clinical advantages and the instruction in administration afforded by the hospital, and that the hospital may enjoy the laboratory conveniences of the school. These buildings are estimated to cost $350,000.

Estimates for new construction which are absolutely essential to the proper care of the sick have been for some years eliminated from the estimates of this office in accordance with the instructions of the Secretary of War in order to reduce the War Department estimates until now the necessities of the medical department in this respect have become very urgent and have accumulated to a large total. The following are the items which it is considered are immediately necessary and are accordingly included in the estimate laid before the Secretary for the fiscal year 1914–15:

Hospitals:	
Fort McPherson, Ga.	$90,000
Fort Hamilton, N. Y.	60,000
Fort Logan H. Roots, Ark.	50,000
Fort Dade, Fla.	30,000
Dispensary, Presidio of San Francisco, Cal.	25,000
Dispensary, Washington Barracks, D. C.	25,000
Three isolation hospitals.	60,000
To enlarge and improve hospitals at artillery posts.	100,000
Enlargement of hospitals:	
Fort Benjamin Harrison, Ind.	40,000
Fort Des Moines, Iowa.	40,000
Fort Crook, Nebr.	25,000
Fort Missoula, Mont.	40,000
Fort Niagara, N. Y.	35,000
Fort Terry, N. Y.	25,000
Additional buildings, Fort Shafter, Hawaii.	120,000
Construction and repair, Philippine Islands.	120,000
Army Medical School, Washington, D. C.	350,000
Army and Navy General Hospital, Hot Springs, Ark.	420,000
Additional wards, general hospital, Fort Bayard, N. Mex.	50,000
Repairs, hospitals, all posts in the United States.	200,000
Repairs and additions to general hospitals.	125,000
Total for construction and repair of hospitals.	2,030,000
Quarters for sergeants, first class, Philippine Islands.	12,000
New quarters for sergeants, first class, all posts in the United States.	133,500
Additions and repairs.	25,000
Total for hospital corps sergeants' quarters.	170,500

MEDICAL AND HOSPITAL SUPPLIES.

The appropriation made by Congress for the fiscal year of 1913 was $700,000, this being the amount asked for in the estimate submitted by the honorable Secretary of War.

It is believed that steady progress has been made in the provision of medical and surgical apparatus and supplies of the highest class obtainable in the markets. Effort is made to keep the equipment

abreast with the demands for modern medical and surgical treatment, and it is thought that this has been fully accomplished during the past fiscal year.

Supply depots have been maintained at the same points as heretofore, and the service of supply has been adequately met. The concentration of the division at Galveston was attended to without trouble so far as the medical supplies were concerned, and the equipment is believed to have been satisfactory.

No particular new developments have been made in any line of endeavor in the matter of field supplies, but the accumulation has been pushed forward to the degree possible with the appropriations available.

Supplies to the value of $35,308.18 were issued to the Philippine Islands during the year.

Authorized dispositions of serviceable Army medical stores during the fiscal year 1913, exclusive of supplies issued for the relief of flood sufferers in the Ohio and Mississippi Valleys, amounted to $80,206.60, as shown by the records of this office on June 30, 1913, of which $59,915.46 had on or before June 30 been placed to the credit of the replacing fund established by the act approved June 12, 1906 (34 Stats., 256), and $20,291.14 was in the course of settlement. The details follow:

A. Supplies issued to States for the use of the Organized Militia, under section 1661, Revised Statutes, and appropriations supplementary thereto:

California	$3,866.48
Colorado	3,163.81
Connecticut	659.48
District of Columbia	2,147.85
Florida	5.95
Georgia	3,780.66
Idaho	74.50
Indiana	292.09
Kentucky	336.39
Louisiana	223.50
Maine	340.96
Maryland	1,794.00
Massachusetts	381.41
Michigan	1,365.40
Minnesota	107.67
Mississippi	279.38
Missouri	809.22
Nebraska	1,310.61
New Hampshire	347.15
New Jersey	1,971.13
New York	7,179.32
North Carolina	73.30
North Dakota	187.22
Ohio	1,775.66
Oklahoma	149.00
Pennsylvania	684.24
Rhode Island	195.45
South Carolina	223.50
Tennessee	2.38
Texas	2,637.09
Virginia	17.14
Washington	11.26
West Virginia	330.26
	$36,723.46

B. Supplies sold to States under section 17, act of Jan. 21, 1903 (32 Stats., 778):		
Alabama	$39.75	
California	212.83	
Florida	10.25	
Georgia	3.00	
Iowa	7.20	
Kentucky	5.25	
Maine	93.13	
Massachusetts	493.86	
Minnesota	51.90	
New York	31.74	
Ohio	5.25	
Pennsylvania	475.41	
South Carolina	5.25	
Tennessee	3.00	
Virginia	7.00	
Washington	4.41	
West Virginia	150.00	
		$1,599.23
C. Supplies transferred to other bureaus and departments of the Government:		
Quartermaster's Department and Quartermaster Corps, United States Army	$813.98	
Engineer Department, United States Army	93.00	
Insular Bureau, War Department	529.91	
Isthmian Canal Commission	12,060.98	
Navy and Marine Corps	7,932.53	
Public-Health Service	2.00	
Reclamation Service	277.05	
Indian Service	16.50	
		21,725.95
D. Sales to the civil government of the Philippine Islands		3.82
E. Sales to the United States Soldiers' Home		12,997.03
F. Sales to the American National Red Cross		57.81
G. Sales to civilian employees of the Army and civilians		7,099.30
		$80,206.60

In addition to the foregoing, army medical supplies to the value of $8,239.40 were issued toward the relief of sufferers from floods in the Ohio and Mississippi Valleys in the spring of 1913 for which no reimbursement has at the date of this compilation (July 22, 1913) been authorized by Congress; and supplies estimated at $2,200 were issued to the Soldiers' Home which have not yet become matters of account in this office.

ARTIFICIAL LIMBS AND APPARATUS.

Under laws relating to artificial limbs and apparatus, or commutation therefor, orders on manufacturers were given during the fiscal year for 17 legs and 1 foot. Commutation certificates were issued for 155 cases of amputated leg, 92 of amputated arm, 7 of amputated foot, and 1,667 cases of loss of use of limb.

Under the act of June 17, 1870, and subsequent amendments thereto, 23,583 disabled soldiers and sailors have been furnished artificial limbs or apparatus, or have received commutation in money since the passage of the act, as follows: Total number benefited to June 30, 1913, 23,583; died, 14,236; dropped from rolls, 592; rejected after one or more payments, 571; remaining on rolls at end of fiscal year, 8,192, being a loss of 321 beneficiaries during the year.

Two-thirds of the periodical claims for benefits under the artificial-limb laws for the three years ending June 30, 1917, become due in the fiscal year 1915. To meet these claims it is estimated that the sum of $275,000 will be required.

APPLIANCES AND TRUSSES.

One hundred and twenty-two appliances were issued during the fiscal year, and 353 trusses were furnished and fitted.

LIBRARY OF THE SURGEON GENERAL'S OFFICE.

During the year 525 books and 4,205 pamphlets and journals were presented to the library. The following table shows the additions made to the library during the year 1912–13:

	On hand June 30, 1912.	Added during fiscal year.	Total, June 30, 1913.
Medical journals	56,007	1,950	57,957
Medical transactions	8,768	72	8,830
Bound theses	2,649	.....	2,649
Bound pamphlets	3,127	.....	3,127
Other medical books	108,077	1,892	109,969
Total	178,628	3,914	182,532
Medical theses	89,788	2,974	92,762
Medical pamphlets	225,803	4,084	229,887
Total	315,591	7,058	322,649

Volume XVIII of the Index Catalogue is in the course of preparation and will appear in due time. It includes the important subject of "Tuberculosis" and its subdivisions, which will fill about one-third of the volume.

Last year the recommendation was made that two translators be provided at a salary of $1,800 in lieu of two clerks of class 2. Application for this change was made to Congress, but it was not allowed in the legislative, executive, and judicial bill as passed for the coming fiscal year. The change, which would only add $800 per annum to the salary list, is deemed very necessary for the future welfare of the library. It would provide for two much needed specialists at a reasonable salary and in case of vacancy make it possible to apply directly to the civil service for men with a knowledge of several foreign languages and in addition either a special training in bibliography or medicine or both. At present the loss of a qualified clerk of the higher grade, experienced in library work, a graduate in medicine, or a bibliographer results, consequent upon the promotions in the Surgeon General's Office, in a vacancy in the grade of clerk at $1,000, and it is hopeless to expect to obtain a specially trained man at such a low salary.

ARMY MEDICAL MUSEUM.

The total number of specimens in the museum at the close of the fiscal year 1913 is 35,151. During the year 315 were discarded or given away and 868 were added.

The following statement shows the number of specimens in the different sections:

Pathological section	13,02
Anatomical section	1,19
Comparative anatomy	62
Microscopical section	12,91
Miscellaneous section	3,78
Provisional anatomical section	36
Photographic section	3,25

The following are some of the more interesting specimens received during the year ending June 30, 1913.

PATHOLOGICAL SECTION.

Malformations.—Specimen, 14293, eight months fetal horse showing shortening of maxillæ. Purchased. Specimen 14300, fetal pig showing thickened humerus and both forearms shortened; only one bone, the ulna, in each forearm, and ankylosed to the humerus. Contributed by T. D. Crane, Blenco, Iowa. Specimen 14294, seven months human fetus, anencephalus and spina bifida. Contributed by First Lieut. G. B. Lake, Medical Corps, United States Army. Specimen 14322, kitten with two faces and four eyes, pseudencephalus and spina bifida. Contributed by Dr. Benj. Newhouse, Washington, D. C.

Ectopic gestation.—Two specimens, 14325, 14326; one at two months, the other at four months; removed by operation, recovery. Contributed by Dr. Isabel H. Lamb, Washington, D. C.

Tuberculosis.—Specimen 14315, tuberculoma of cerebellum; woman, age 42; had pain in top of head and in neck, marked loss of hair, staggered in walking, falling toward the left, and head turned to the left. Contributed by Dr. P. B. Johnson, Washington, D. C. Specimens 14308 to 14311, tuberculosis of lungs, intestine, spleen and lymphatic nodes; in an infant of 4 months. Contributed by Dr. B. M. Randolph, Washington, D. C.

Gangrene of leg and foot.—Specimen 14301; clots in popliteal and tibial arteries; soldier; had chronic myoendocarditis; heart hypertrophied; aortic valve incompetent; died of acute cardiac insufficiency. Contributed by Lieut. Col. W. D. Crosby, Medical Corps, United States Army.

Syphilis.—Specimens 14282 to 14288; seven skulls from Mongolia showing lesions of syphilis. Obtained by Dr. Aleš Hrdlička, curator United States National Museum.

Gunshot wound.—Specimen 14270, shot laceration of hand, caused by premature explosion of powder, firing a sunset gun; soldier

amputation, recovery. Contributed by Maj. L. T. Hess, Medical Corps, United States Army.

Bone.—Specimen 14314; sarcoma, giant celled; no history. Contributed by Dr. A. R. Shands, Washington, D. C.

Brain.—Specimen 14280; adenocarcinoma of brain; contributor unknown. Specimen 14297, hemorrhage on and into brain; from man who fell 35 feet and struck sidewalk with his head; fracture of skull; trephining done without success. Contributed by Dr. B. M. Randolph, Washington, D. C.

Heart.—Specimen 14312, fibrinous pericarditis; soldier; had old chronic cystitis and interstitial nephritis; had had gonorrhea two years before. Contributed by Lieut. Col. T. U. Raymond, Medical Corps, United States Army. Specimens 14295 and 14296, hypertrophy of heart and parenchymatous nephritis; boy 7 years old; heart weighed 8½ ounces. Contributed by Dr. D. O. Leech, Washington, D. C. Specimen 14272, lymphosarcoma of mediastinum involving pericardium and pleuræ, and probably originated in mediastinal glands; soldier; was aspirated many times for serofibrinous pleuritis. Contributed by Maj. B. J. Edger, Medical Corps, United States Army.

Air passages.—Specimen 14274, partial stenosis of trachea and primary bronchi, caused by scar tissue; woman age 32; had suffocative seizures, in one of which she died. Contributed by Dr. E. H. Reede, Washington, D. C.

Stomach.—Specimen 14281, adeno-carcinoma of stomach; removed by operation; no history. Contributed by Dr. J. F. Mitchell, Washington, D. C.

Intestine.—Specimen 14278, diverticulum of jejunum perforated by apex, followed typhoid fever; peritonitis; operation, removal of specimen. Contributed by Capt. C. L. Cole, Medical Corps, United States Army. Specimen 14304, mesenteric hernia in boy 2 years old; had stercoraceous vomiting and other symptoms of obstruction; operation, specimen removed; peritonitis ensued and death. Contributed by Dr. J. R. Wellington, Washington, D. C.

Kidney.—Specimens 14275 and 14276, hypernephroma of kidney and liver; soldier; had occasional hematuria; kidney weighed 4 pounds 15 ounces and liver 5 pounds. Contributed by Maj. B. J. Edger, Medical Corps, United States Army. Specimen 14319, congenital cyst of kidney; soldier; no symptoms. Contributed by Capt. J. W. Grissinger, Medical Corps, United States Army. Specimen 14320, renal calculus, weight 18.6 grams; removed by operation from Army officer; also specimen 14321, renal calculus, weight 19 grains; removed from woman; both specimens contributed by First Lieut. T. J. Leary, Medical Corps, United States Army. Specimen 14330, chronic parenchymatous nephritis; kidneys together weighed only 4 ounces; cortex very thin; some small cysts; no history. Contributed by Dr. R. W. Baker, Washington, D. C.

Prostate.—Specimen 14303, fibroma of prostate of dog. Contributed by Dr. T. C. Smith, Washington, D. C.

Uterus.—Specimen 14292, aneurysm of uterine artery; woman age 36; had had laceration of cervix; trachelorrhaphy was followed by profuse hemorrhage; in fifteenth pregnancy again had profues hemorrhage; from which she died. Contributed by Dr. H. W. Lawson, Washington, D. C.

Eye.—Specimen 14302; eye enucleated because of rupture caused by a blow. Contributed by Capt. C. L. Cole, Medical Corps, United States Army.

Nose.—Specimen 14273, concretion weighing 29 grains; removed from nose, after two years nasal discharge. Contributed by Dr. W. C. Williams, Peoria, Ill.

ANATOMICAL SECTION.

Specimens 4120 to 4122, three preparations showing transparency of tissues resulting from the Spalteholz process. Purchased.

MISCELLANEOUS SECTION.

Specimen 3861, a life-size painting of the average American Infantry soldier; by M. P. Whelan, Jersey City, N. J.; the average Infantry soldier is 30.9 years old, weighs 147.09 pounds, height 67.4 inches, chest in expiration 34.07 inches. Specimen 3862, Straub's garbage incinerator; Maj. P. F. Straub, Medical Corps, United States Army. Specimen 3871, Halloran folding stretcher; Maj. P. S. Halloran, Medical Corps, United States Army. Specimen 3880, old dental operating case; contributed by Dr. C. W. Mills, Chillicothe, Ohio. Specimens 3881 to 3903, series of shoes and boots, patterns used by United States soldiers 1872 to 1913. Purchased. Specimen 3869, Darnall sterilizing apparatus; Maj. Carl R. Darnall, Medical Corps, United States Army. Specimen 3970, Waterhouse-Forbes sterilizer. Specimen 3937, old French student microscope, with lever movement of stage. Specimens of sphygmomanometers, manometers, tonometers, as follows; 3850 Erlaner's; 3851 Cook's Riva-Rocci; 3852, Sahli's; 3853, Stein's; 3854, Stanton's; 3855, Gaertner's; 3863 Huerthle's; 3864, Strasburg; 3865, Bloch-Verdin's; 3866, Boulemie's; 3867, Pachen's; 3906, Nicholson's. Specimen 3904, plaster cast of skull of fossil monkey, the mesopithecus. Specimen 3936, plaster cast of calvarium of the fossil *Spy* man.

DENTAL AND ORAL DISEASES.

The number of dental operations during the year was 66,683, being an increase over the preceding year, which was 57,454. The ratio per 1,000 of mean strength was also greater, being 780.61, as compared with 716.54. This, however, can not be taken as a measure of the dental diseases of the Army, but represents what the number of dentists available are able to accomplish. The number of dentists authorized has been increased by Congress, so that ultimately each man in the Army can receive at least one treatment yearly.

The summary of the work of dental surgeons is contained in the following table:

TABLE No. 47.—*Dental and oral diseases, year 1912—Officers and enlisted men.*

	Cases admitted to treatment.		Operations performed.	
	Number.	Ratio.	Number.	Ratio.
United States (continental), exclusive of Alaska	44,280	721.11	48,048	782.48
Philippine Islands	17,138	925.28	21,168	1,142.86
Hawaii	3,355	945.33	2,863	806.71
Canal Zone, Panama	1,008	1,248.82	1,408	1,744.73
China	902	790.53	978	857.14
Total	66,683	780.61	74,465	871.71

DENTAL CARIES—NUMBER OF TEETH TREATED.

	White troops.		Colored troops.		Philippine troops.		Total.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
United States (continental), exclusive of Alaska	28,578	485.06	216	86.82	.....	.....	28,794	468.92
Philippine Islands	7,800	663.04	1,033	764.62	616	113.93	9,449	510.15
Hawaii	1,744	491.41	.....	.....	.....	.....	1,744	491.41
Canal Zone, Panama	677	838.91	.....	.....	.....	.....	677	838.91
China	505	442.59	.....	.....	.....	.....	505	442.59
Total	39,304	515.95	1,249	325.35	616	113.93	41,169	481.94

RECRUITING.

AMERICAN TROOPS.

The movement of recruits is shown in Table No. 48. Each recruit before enlistment was given a thorough examination by a medical officer of the Army. There were 32,738 examined, as compared with 50,534 for the preceding year. Of each 1,000 examined, 120.96 were rejected and 23.86 declined enlistment, as compared with 90.55 and 16.33 for 1911. Of each 1,000 examined by medical officers, 855.18 were accepted, as compared with 893.12 for 1911. Of the number examined and enlisted, 308.51 per 1,000 were reenlistments and 546.67 were original enlistments, as compared with 408.52 and 484.60 for 1911.

TABLE NO. 48.—*Movement of recruits, white and colored, 1912.*

	White.		Colored.		Total.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Examined by medical officers	30,374	1,000.00	2,364	1,000.00	32,738	1,000.00
Accepted by medical officers	25,952	854.42	2,045	865.06	27,997	855.18
By first enlistment	16,381	539.31	1,516	641.29	17,897	546.67
By all other enlistments	9,571	315.11	529	223.77	10,100	308.51
Rejected by medical officers	3,680	121.16	280	118.44	3,960	120.96
Declined	742	24.43	39	16.50	781	23.86

This table shows only the applicants who had previously passed the scrutiny of the recruiting officers at the various recruiting stations in cities and towns and who were therefore picked men. The number of examinations and of rejections by recruiting officers is not known to this office, but was, of course, much larger. The present recruiting system operates in a highly satisfactory manner and furnishes to the Army recruits of far better quality than when they were examined under the former system of civilian physicians at the places of enlistment.

TABLE NO. 49.—*Nativities of accepted recruits, American Army, 1912.*

Country of birth.	Accepted recruits, year 1912.		Country of birth.	Accepted recruits, year 1912.	
	Number.	Ratio per 1,000 of total accepted.		Number.	Ratio per 1,000 of total accepted
United States:			Denmark	88	3.14
White	22,381	799.41	Scotland	56	2.00
Colored	2,045	73.04	Turkey	48	1.71
			Holland	42	1.50
Total native born	24,426	872.45	Switzerland	41	1.46
			Roumania	36	1.28
Germany	650	23.22	France	35	1.25
Russia	587	20.97	Greece	22	.79
Ireland	515	18.39	West Indies	19	.68
Austria	448	16.00	Other	49	1.75
England	238	8.51			
Hungary	217	7.75	Total foreign born	3,571	127.55
Canada	167	5.96			
Italy	161	5.75	Grand total	27,997	1,000.00
Scandinavia	152	5.43			

The number of foreign-born recruits is less than last year, being 27.55 per 1,000 for 1912, as compared with 138.04 for 1911 and 45.56 for 1910. The most marked decrease in the proportion of recruits was from Ireland, Germany, and England in the order named.

The following tables have been carefully compiled and are of interest, as they show the state of physical development of the men admitted to the Army during the year. The ages of all the recruits accepted, including those reenlisted, white and colored, and the proportion at each age per 1,000 are shown in this statement.

TABLE No. 50.—*Ages of recruits, white and colored, and the proportion at each age per 1,000 accepted.*

Agse.	White.		Colored.		Total.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
8 years and under	1,989	76.64	125	61.13	2,114	75.51
9 years	1,148	44.24	97	47.43	1,245	44.47
0 years	600	23.12	57	27.87	657	23.47
1 years	6,118	235.74	412	201.47	6,530	233.24
2 years	2,555	98.45	227	111.00	2,782	99.36
3 years	1,604	61.81	156	76.28	1,760	62.86
4 years	1,808	69.67	156	76.28	1,964	70.15
5 years	1,421	54.76	113	55.26	1,534	54.79
6 years	1,123	43.27	99	48.41	1,222	43.65
7 years	1,072	41.31	98	47.92	1,170	41.79
8 years	896	34.53	76	37.16	972	34.72
9 years	766	29.52	55	26.90	821	29.32
0 years	628	24.20	50	24.45	678	24.22
1 years	577	22.23	41	20.05	618	22.07
2 years	558	21.50	42	20.54	600	21.43
3 years	449	17.30	52	25.43	501	17.90
4 years	356	13.72	20	9.78	376	13.43
5 years	305	11.75	21	10.27	326	11.64
6 years	297	11.44	23	11.25	320	11.43
7 years	234	9.02	24	11.74	258	9.22
8 years	176	6.78	17	8.31	193	6.89
9 years	172	6.63	16	7.82	188	6.71
0 years and over	1,100	42.39	68	33.25	1,168	41.72
Total	25,952	1,000.00	2,045	1,000.00	27,997	1,000.00

The proportion of accepted recruits under the age of 24 has noticeably increased in comparison with last year, being due undoubtedly to the much larger proportion of original enlistments of each 1,000 recruits examined and accepted by medical officers. Six hundred and nine and sixty-seven one-hundredths were 24 years of age or under as compared with 558.11 in 1911. The ages of 21 and 22 this year, as last year, furnished the largest number for any age in the order named.

The series of tables which follow show separately for each race the height of accepted recruits for the year, and the proportion of each height per 1,000; also, in absolute and proportional numbers, the relation of height to age.

TABLE No. 51.—*Relation of height to age.*

ABSOLUTE NUMBERS—WHITE RECRUITS, YEAR 1912.

Heights.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
5 feet 1 inch and under									1	1
5 feet 2 inches	2			4			3	1	5	15
5 feet 3 inches	18	14	9	56	29	12	15	6	88	247
5 feet 4 inches	164	96	43	357	140	86	110	77	538	1,611
5 feet 5 inches	296	152	75	602	264	170	176	161	912	2,808
5 feet 6 inches	353	205	80	895	389	226	222	196	1,288	3,854
5 feet 7 inches	350	196	116	1,108	427	272	305	246	1,511	4,531
5 feet 8 inches	346	193	110	1,014	416	302	300	247	1,460	4,388
5 feet 9 inches	208	140	78	868	343	214	270	193	1,115	3,428
5 feet 10 inches	151	82	53	643	283	177	179	135	870	2,573
5 feet 11 inches	68	40	21	325	140	77	117	92	476	1,356
6 feet	26	20	10	162	86	46	71	45	268	734
6 feet 1 inch	4	5	1	53	22	14	24	17	104	244
6 feet 2 inches and over	3	5	4	31	16	8	16	5	73	161
Total	1,989	1,148	600	6,118	2,555	1,604	1,808	1,421	8,709	25,952

PROPORTIONAL NUMBERS—WHITE RECRUITS, YEAR 1912.

5 feet 1 inch and under									0.11	0.04
5 feet 2 inches	1.01			0.65			1.66	0.70	.57	.58
5 feet 3 inches	9.05	12.20	15.00	9.15	11.35	7.48	8.30	4.22	10.11	9.52
5 feet 4 inches	82.45	83.62	71.67	58.35	54.80	53.61	60.84	54.19	61.78	62.08
5 feet 5 inches	148.82	132.40	125.00	98.40	103.33	105.99	97.35	113.30	104.73	108.20
5 feet 6 inches	177.48	178.57	133.33	146.29	152.26	140.90	122.79	137.93	147.89	148.50
5 feet 7 inches	175.97	170.73	193.33	181.11	167.11	169.58	168.70	173.12	173.50	174.58
5 feet 8 inches	173.95	168.12	188.33	165.75	162.82	188.28	165.92	173.82	167.64	169.09
5 feet 9 inches	104.58	121.96	130.00	141.87	134.25	133.41	149.33	135.82	128.03	132.15
5 feet 10 inches	75.92	71.43	88.33	105.10	110.77	110.36	99.01	95.71	99.90	99.14
5 feet 11 inches	34.19	34.85	35.00	53.12	54.80	48.01	64.72	64.74	54.66	52.24
6 feet	13.07	17.42	16.67	26.48	33.66	28.68	39.27	31.67	30.77	28.29
6 feet 1 inch	2.01	4.36	1.67	8.66	8.61	8.73	13.27	11.96	11.94	9.40
6 feet 2 inches and over	1.51	4.36	6.67	5.07	6.26	4.99	8.85	3.52	8.38	6.20
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

TABLE No. 52.—*Relation of height to age.*

ABSOLUTE NUMBERS—COLORED RECRUITS, YEAR 1912.

Heights.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
5 feet 1 inch and under										
5 feet 2 inches										
5 feet 3 inches			1	3	1	4	3		4	16
5 feet 4 inches	19	7	3	33	14	11	8	8	32	135
5 feet 5 inches	19	22	7	54	30	9	22	18	81	262
5 feet 6 inches	21	15	13	61	30	28	21	20	116	325
5 feet 7 inches	24	17	4	66	42	31	28	24	125	361
5 feet 8 inches	18	17	5	78	40	24	23	14	104	323
5 feet 9 inches	14	8	11	51	24	25	20	14	106	273
5 feet 10 inches	6	6	4	35	22	12	15	5	71	176
5 feet 11 inches	4	3	3	22	16	6	8	6	36	104
6 feet		2	4	5	6	4	5	3	18	47
6 feet 1 inch			1	3	1	1	2		7	15
6 feet 2 inches and over			1	1	1	1	1	1	2	8
Total	125	97	57	412	227	156	156	113	702	2,045

TABLE No. 52.—*Relation of height to age*—Continued.

PROPORTIONAL NUMBERS—COLORED RECRUITS, YEAR 1912.

Heights.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
5 feet 1 inch and under	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5 feet 2 inches	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5 feet 3 inches	.....	.....	17.54	7.28	4.41	25.64	19.23	.....	5.70	7.82
5 feet 4 inches	152.00	72.17	52.63	80.09	61.67	70.51	51.29	70.80	45.58	66.02
5 feet 5 inches	152.00	226.80	122.81	131.07	132.16	57.69	141.03	159.30	115.38	128.12
5 feet 6 inches	168.00	154.64	228.07	148.06	132.16	179.49	134.62	176.99	165.24	158.93
5 feet 7 inches	192.00	175.26	70.18	160.19	185.03	198.72	179.49	212.39	178.06	176.53
5 feet 8 inches	144.00	175.26	87.72	189.32	176.21	153.85	147.44	123.89	148.15	157.96
5 feet 9 inches	112.00	82.48	193.00	123.79	105.73	160.26	128.21	123.89	151.00	133.50
5 feet 10 inches	48.00	61.86	70.18	84.95	96.92	76.92	96.15	44.25	101.14	86.07
5 feet 11 inches	32.00	30.93	52.63	53.40	70.48	38.46	51.29	53.10	51.28	50.86
6 feet	.....	20.62	70.18	12.14	26.43	25.64	32.05	26.55	25.61	22.98
6 feet 1 inch	.....	.....	17.54	7.28	4.41	6.41	12.82	.....	9.97	7.33
6 feet 2 inches and over	.....	.....	17.54	2.43	4.41	6.41	6.41	8.85	2.85	3.91
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

It will be noted that 49.65 per cent of the white recruits were 5 feet 8 inches or over and 1.01 per cent were under the minimum height of 5 feet 4 inches, as compared with 49.07 and 1.12 for the previous year.

For colored troops 46.26 were 5 feet 8 inches or over and 0.78 per cent were under the minimum height, as compared with 46.59 and 1.02.

The average height for recruits was 5 feet 7.57 inches, as compared with 5 feet 7.56 inches in 1911.

The following tables show separately for each race the weight of accepted recruits and the proportion of each weight per 1,000; also the relation of weight to age in both absolute and proportional numbers:

TABLE No. 53.—*Relation of weight to age.*

ABSOLUTE NUMBERS—WHITE RECRUITS YEAR 1912.

Weights.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
119 pounds and under	40	22	3	57	21	15	23	12	120	313
120 to 124 pounds	338	155	63	436	139	61	64	60	358	1,674
125 to 129 pounds	392	209	89	680	231	141	147	125	609	2,623
130 to 134 pounds	371	212	101	896	337	188	211	164	834	3,314
135 to 139 pounds	318	164	100	1,044	400	250	257	182	1,012	3,727
140 to 144 pounds	203	153	72	906	371	246	259	190	1,067	3,467
145 to 149 pounds	129	98	77	740	301	204	233	195	983	2,960
150 to 154 pounds	92	57	38	546	240	181	197	162	892	2,405
155 to 159 pounds	44	32	29	316	228	128	143	112	651	1,683
160 to 164 pounds	31	18	17	212	111	75	96	88	528	1,176
165 to 169 pounds	16	10	5	125	76	44	74	48	449	847
170 to 174 pounds	7	9	2	77	43	25	43	29	334	569
175 to 179 pounds	5	4	2	39	32	19	25	18	228	372
180 pounds and over	3	5	2	44	25	27	36	36	644	822
Total	1,989	1,148	600	6,118	2,555	1,604	1,808	1,421	8,709	25,952

TABLE No. 53.—*Relation of weight to age*—Continued.

PROPORTIONAL NUMBERS—WHITE RECRUITS YEAR 1912.

Weights.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
119 pounds and under	20.11	19.16	5.00	9.32	8.22	9.35	12.72	8.44	13.78	12.06
120 to 124 pounds	169.93	135.02	105.00	71.27	54.40	38.03	35.40	42.22	41.11	64.50
125 to 129 pounds	197.08	182.06	148.33	111.15	90.41	87.91	81.30	87.96	69.92	101.07
130 to 134 pounds	186.52	184.67	168.33	146.46	131.89	117.21	116.70	115.41	95.76	127.70
135 to 139 pounds	159.88	142.86	166.67	170.64	156.56	155.86	142.14	128.08	116.20	143.61
140 to 144 pounds	102.06	133.27	120.00	148.09	145.21	153.37	143.25	133.71	122.51	133.60
145 to 149 pounds	64.86	85.37	128.33	120.96	117.81	127.18	128.87	137.22	112.87	114.06
150 to 154 pounds	46.26	49.65	63.33	89.25	93.93	112.84	108.96	114.01	102.43	92.67
155 to 159 pounds	22.12	27.88	48.33	51.65	89.24	79.80	79.10	78.82	74.75	64.85
160 to 164 pounds	15.59	15.68	28.33	34.65	43.45	46.76	53.10	61.93	60.63	45.32
165 to 169 pounds	8.04	8.71	8.33	20.43	29.75	27.43	40.93	33.78	51.56	32.64
170 to 174 pounds	3.52	7.84	3.33	12.59	16.83	15.59	23.78	20.41	38.35	21.93
175 to 179 pounds	2.51	3.48	3.33	6.37	12.52	11.84	13.83	12.67	26.18	14.33
180 pounds and over	1.51	4.36	3.33	7.19	9.78	16.83	19.91	25.34	73.94	31.67
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

TABLE No. 54.—*Relation of weight to age.*

ABSOLUTE NUMBERS—COLORED RECRUITS YEAR 1912.

Weights.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
119 pounds and under	.....	1	1	3	1	1	.....	.....	1	8
120 to 124 pounds	12	7	2	20	7	4	.....	2	18	72
125 to 129 pounds	18	19	9	31	14	12	7	4	36	150
130 to 134 pounds	32	14	7	51	23	19	15	11	56	228
135 to 139 pounds	24	16	10	71	33	26	19	13	79	291
140 to 144 pounds	13	13	7	51	29	23	23	16	91	266
145 to 149 pounds	13	13	3	59	34	17	18	12	96	265
150 to 154 pounds	8	7	6	45	28	15	21	15	81	226
155 to 159 pounds	4	5	1	32	26	10	15	17	63	173
160 to 164 pounds	1	.....	5	20	11	14	15	6	43	115
165 to 169 pounds	.....	1	2	11	8	8	12	7	41	90
170 to 174 pounds	.....	.....	1	9	5	3	1	4	23	46
175 to 179 pounds	.....	1	2	4	4	2	5	2	24	44
180 pounds and over	.....	.....	1	5	4	2	5	4	50	71
Total	125	97	57	412	227	156	156	113	702	2,045

PROPORTIONAL NUMBERS—COLORED RECRUITS YEAR 1912.

119 pounds and under	.....	10.31	17.54	7.28	4.41	6.41	.....	.....	1.42	3.91
120 to 124 pounds	96.00	72.17	35.09	48.54	30.84	25.64	.....	17.70	25.64	35.21
125 to 129 pounds	144.00	195.88	157.90	75.24	61.67	76.92	44.87	35.40	51.28	73.35
130 to 134 pounds	256.00	144.33	122.81	123.79	101.32	121.79	96.15	97.35	79.77	111.49
135 to 139 pounds	192.00	164.95	175.44	172.33	145.37	166.67	121.79	115.04	112.54	142.30
140 to 144 pounds	104.00	134.02	122.81	123.79	127.75	147.44	147.44	141.60	129.62	130.06
145 to 149 pounds	104.00	134.02	52.63	143.20	149.78	108.97	115.38	106.20	136.75	129.58
150 to 154 pounds	64.00	72.17	105.26	109.22	123.35	96.15	134.62	132.74	115.38	110.50
155 to 159 pounds	32.00	51.55	17.54	77.67	114.54	64.10	96.15	150.44	89.74	84.60
160 to 164 pounds	8.00	.....	87.72	48.54	48.46	89.74	96.15	53.10	61.25	56.23
165 to 169 pounds	.....	10.31	35.09	26.70	35.24	51.28	76.92	61.95	58.40	44.01
170 to 174 pounds	.....	.....	17.54	21.84	22.03	19.23	6.41	35.40	32.76	22.49
175 to 179 pounds	.....	10.31	35.09	9.71	17.62	12.82	32.05	17.70	34.19	21.52
180 pounds and over	.....	.....	17.54	12.14	17.62	12.82	32.05	35.40	71.23	34.72
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

The average weight of recruits was 144.20 pounds; of the white troops 55.11 per cent weighed 140 pounds or over, and 1.21 per cent weighed less than the minimum, 120 pounds, as compared with 55.89 and 1.8 for 1911. Of the colored troops, 63.37 per cent weighed 140 pounds or over, while 0.39 per cent weighed less than the minimum, 120 pounds, compared with 70.48 and 0.68 for 1911.

The next tables show separately for each race the chest measurement of accepted recruits, and the proportion of each measurement per 1,000; also the chest measurement in relation to age in both absolute and proportional numbers.

TABLE No. 55.—*Relation of chest measurement to age.*

ABSOLUTE NUMBERS—WHITE RECRUITS YEAR 1912.

Chest measurement.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
30 inches and under.	92	29	16	90	26	14	30	16	131	444
31 inches	257	136	62	395	144	59	85	68	369	1,575
32 inches	664	336	136	1,278	462	241	271	210	1,075	4,673
33 inches	508	309	175	1,637	641	376	411	333	1,537	5,927
34 inches	296	189	100	1,336	567	408	412	310	1,815	5,433
35 inches	116	92	67	811	401	265	319	239	1,432	3,742
36 inches	45	41	35	401	199	144	163	141	1,016	2,185
37 inches	4	12	7	127	77	64	73	59	575	998
38 inches	6	3	1	30	31	23	23	29	353	499
39 inches and over...	1	1	1	13	7	10	21	16	406	476
Total	1,989	1,148	600	6,118	2,555	1,604	1,808	1,421	8,709	25,952

PROPORTIONAL NUMBERS—WHITE RECRUITS YEAR 1912.

30 inches and under.	46.25	25.26	26.67	14.71	10.18	8.73	16.59	11.26	15.04	17.11
31 inches	129.20	118.48	103.33	64.57	56.36	36.78	47.01	47.85	42.37	60.69
32 inches	333.84	292.69	226.67	208.89	180.83	150.25	149.89	147.78	123.44	180.06
33 inches	255.40	269.16	291.67	267.57	250.88	234.41	227.32	234.34	176.49	228.38
34 inches	148.82	164.63	166.67	218.38	221.92	254.36	227.88	218.16	208.40	209.35
35 inches	58.32	80.14	111.67	132.56	156.95	165.22	176.44	168.19	164.43	144.19
36 inches	22.63	35.72	58.33	65.54	77.89	89.78	90.16	99.22	116.66	84.19
37 inches	2.01	10.45	11.67	20.76	30.14	39.90	40.38	41.52	66.03	38.46
38 inches	3.02	2.61	1.67	4.90	12.13	14.34	12.72	20.41	40.53	19.23
39 inches and over...	.50	.87	1.67	2.12	2.74	6.23	11.62	11.26	46.62	18.34
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

TABLE No. 56.—*Relation of chest measurement to age.*

ABSOLUTE NUMBERS—COLORED RECRUITS YEAR 1912.

Chest measurement.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
30 inches and under.	4	1	.....	7	2	.....	1	.....	8	23
31 inches	17	8	3	17	6	2	3	5	31	92
32 inches	44	38	14	64	33	31	23	8	85	340
33 inches	31	23	17	97	58	40	38	26	142	472
34 inches	18	15	10	121	54	31	35	30	144	458
35 inches	8	8	9	60	44	20	27	16	119	311
36 inches	2	3	4	32	22	20	18	17	81	199
37 inches	1	1	.....	8	7	10	5	7	42	81
38 inches	.....	.....	.....	3	1	2	4	3	25	38
39 inches and over...	.....	.....	.....	3	.....	.....	2	1	25	31
Total	125	97	57	412	227	156	156	113	702	2,045

TABLE No. 56.—*Relation of chest measurement to age*—Continued.
PROPORTIONAL NUMBERS—COLORED RECRUITS YEAR 1912.

Chest measurement.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
30 inches and under	32.00	10.31	.....	16.99	8.81	.....	6.41	.....	11.40	11.2
31 inches	136.00	82.48	52.63	41.26	26.43	12.82	19.23	44.25	44.16	44.9
32 inches	352.00	391.75	245.61	155.33	145.37	198.72	147.44	70.80	121.07	166.2
33 inches	248.00	237.11	298.25	235.42	255.50	256.40	243.59	230.10	202.28	230.8
34 inches	144.00	154.64	175.44	293.69	237.88	198.72	224.36	265.50	205.13	223.9
35 inches	64.00	82.48	157.90	145.62	193.84	128.20	173.08	141.60	169.52	152.0
36 inches	16.00	30.93	70.18	77.67	96.92	128.20	115.38	150.44	115.38	97.3
37 inches	8.00	10.31	.....	19.42	30.84	64.10	32.05	61.95	59.83	39.6
38 inches	.....	.....	.....	7.28	4.41	12.82	25.64	26.55	35.61	18.5
39 inches and over	.....	.....	.....	7.28	.....	.....	12.82	8.85	35.61	15.1
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.0

The chest measurement of 54.67 per cent of the white recruits was 34 inches and over and 1.13 per cent were 30 inches and under, as compared with 49.47 and 1.94 per cent, respectively, for the preceding year. The chest measurements for colored recruits show 51.38 per cent 34 inches or over and 1.71 per cent 30 inches and under as compared with 52.19 and 1.88 for 1911.

The following table shows the causes of rejection among white and colored troops examined for enlistment during the year 1912, with the ratios per 1,000 rejected:

TABLE No. 57.—*Causes of rejection by medical officers of the Army, of candidates examined for enlistment, year 1912.*

Causes of rejection.	Total.		White.						Colored.	
			Native born.		Foreign born.		Total.			
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Venereal diseases	387	97.73	318	100.44	22	42.80	340	92.39	47	167.8
Heart disease	375	94.70	309	97.60	41	79.77	350	95.11	25	89.2
Defects of hearing	340	85.86	283	89.39	45	87.55	328	89.13	12	42.8
Defects of vision	331	83.58	275	86.86	38	73.93	313	85.05	18	64.2
Flat feet	219	55.30	170	53.70	36	70.04	206	55.98	13	46.4
Underweight	130	32.83	115	36.32	7	13.62	122	33.15	8	28.5
Diseases of the genito-urinary system	106	26.77	95	30.01	6	11.67	101	27.45	5	17.8
Hernia	102	25.76	79	24.95	10	19.46	89	24.18	13	46.4
Tuberculosis	101	25.51	96	30.32	2	3.89	98	26.63	3	10.7
Alcoholism	101	25.51	92	29.06	5	9.73	97	26.36	4	14.2
Defective teeth	96	24.24	72	22.74	16	31.13	88	23.91	8	28.5
Diseases of the respiratory system	87	21.97	70	22.11	13	25.29	83	22.55	4	14.2
Diseases of the organs of locomotion	82	20.71	63	19.90	12	23.35	75	20.38	7	25.0
Defects of development	80	20.20	62	19.58	10	19.46	72	19.57	8	28.5
Diseases of the skin	74	18.69	61	19.27	6	11.67	67	18.21	7	25.0
Diseases of the nervous system	66	16.67	56	17.69	7	13.62	63	17.12	3	10.7
Chest development insufficient	61	15.40	52	16.42	3	5.84	55	14.94	6	21.4
Varicose veins	55	13.89	44	13.90	8	15.56	52	14.13	3	10.7
Curvature of the spine	47	11.87	39	12.32	1	1.95	40	10.87	7	25.0
General diseases	43	10.86	37	11.69	5	9.73	42	11.41	1	3.5
Weakness of mind	42	10.61	36	11.37	4	7.78	40	10.87	2	7.1
Hemorrhoids	42	10.61	31	9.79	3	5.84	34	9.24	8	28.5
Diseases of the digestive system	31	7.83	26	8.21	1	1.95	27	7.34	4	14.2
Diseases of the circulatory system	21	5.30	19	6.00	1	1.95	20	5.43	1	3.5
Varicocele	16	4.04	14	4.42	1	1.95	15	4.08	1	3.5
Overweight and obesity	13	3.28	9	2.84	3	5.84	12	3.26	1	3.5
Under height	12	3.03	10	3.16	1	1.95	11	2.99	1	3.5
Physical debility	5	1.26	5	1.58	.....	.....	5	1.36	.....	.....
Over height	2	.51	2	.63	.....	.....	2	.54	.....	.....
Injuries	127	32.07	108	34.11	10	19.46	118	32.07	9	32.1
Rejected for causes, physical and mental	3,194	806.57	2,648	836.39	317	616.73	2,965	805.71	229	817.8
Rejected for causes not physical	766	193.43	518	163.61	197	383.27	715	194.29	51	182.1
Total rejected	3,960	1,000.00	3,166	1,000.00	514	1,000.00	3,680	1,000.00	280	1,000.0

This year as last the diseases causing the greatest number of rejections were as follows in the order named: Venereal diseases, heart disease, defective hearing, defective vision, and flat feet. The number per 1,000 rejected for the last four causes was about the same in 1912 as in 1911. Venereal diseases, which caused the largest proportion of rejections, was lower than 1911, being in 1912, 97.73 as compared with 111.67 in 1911. In the white race, venereal diseases caused the second highest number of rejections, being 92.39 per 1,000, while heart disease caused 95.11. In the colored race, however, the rate for venereal diseases was 167.86 per 1,000. This was lower, however, than in 1911, when it was 221.65. Table No. 58 shows the principal occupations of 24,489 recruits enlisted during the year:

TABLE No. 58.—*Principal occupations of recruits, first enlistment, year 1912.*

Occupation.	Number in each case.			Occupation.	Number in each case.		
	Total.	White.	Colored.		Total.	White.	Colored.
Laborers	5,332	4,509	823	Leather workers	29	28	1
Farmers	2,709	2,633	76	Cigar makers	27	27	.....
Clerks	963	959	4	Core makers	27	26	1
Drivers and stablemen	905	839	66	Draftsmen	26	26	.....
Machinists	622	615	7	Furniture workers	26	26	.....
Miners	516	498	18	Civil engineers	23	23	.....
Cooks	408	319	89	Merchants	23	22	1
Carpenters	400	386	14	Cement workers	21	18	3
Firemen	382	358	24	Bridge workers	18	18	.....
Painters	356	348	8	Photographers	17	17	.....
Electricians	278	270	8	Foremen	17	16	1
Plumbers	246	243	3	Packers	16	14	2
Musicians	243	229	14	Confectioners	16	16	.....
Printers	229	224	5	Actors	16	15	1
Waiters	218	147	71	Gardeners	16	16	.....
Barbers	209	188	21	Undertakers	16	14	2
Railroad hands	202	182	20	Box makers	15	15	.....
Tailors	173	161	12	Drillers	14	12	2
Butchers	160	155	5	Hatters	13	13	.....
Salesmen	160	160	.....	Laundrymen	13	10	3
Porters	158	49	109	Coopers	12	12	.....
Chauffers	154	133	21	Journalists	11	10	1
Metal workers	151	149	2	Bartenders	11	10	1
Bakers	147	141	6	Rubber workers	11	11	.....
Blacksmiths	126	113	13	Dairymen	11	11	.....
Shoemakers	124	121	3	Doctors	11	9	2
Bookkeepers	111	111	.....	Trimmers	11	11	.....
Telegraphers	112	112	.....	Florists	10	10	.....
Sailors	99	94	5	Lithographers	10	10	.....
Weavers	97	97	.....	Oilers	10	10	.....
Engineers	94	93	1	Roofers	10	10	.....
Linemen	83	82	1	Inspectors	9	9	.....
Masons (brick and stone)	81	73	8	Agents	8	7	1
Molders	74	62	12	Chemists	8	8	.....
Mill workers	74	74	.....	Collectors	8	8	.....
Tinners	71	70	1	Automobile workers	7	7	.....
Mechanics	94	92	2	Bottlers	7	6	1
Students	61	59	2	Brewers	6	6	.....
Boilermakers	56	56	.....	Potters	7	6	1
Horseshoers	49	49	.....	Dyers	7	7	.....
Teachers	48	46	2	Designers and decorators	6	6	.....
Motormen	48	48	.....	Fishermen	6	4	2
Druggists	45	43	2	Ball players	6	6	.....
Nurses	45	45	.....	Dentists	6	6	.....
Glass workers	43	42	1	Moving-picture operators	6	6	.....
Lumbermen	42	40	2	Upholsterers	6	6	.....
Jewelers	35	35	.....	Miscellaneous	129	128	1
Stenographers	33	33	.....				
Plasterers	33	27	6	Total	17,897	16,382	1,515
Paper workers	30	29	1				
Conductors	29	29	.....				

PHILIPPINE SCOUTS.

The following is from General Order No. 1, Headquarters Philippines Division, Manila, P. I., January 1, 1910:

The physical examination of recruits for the Philippine Scouts will be conducted in accordance with the authorized manual for the examination of recruits, except as hereinafter specified. It will include examination for filarial disease, and any applicant afflicted therewith will be rejected.

No recruit for the Scouts will be accepted for enlistment who is under 59 inches in height or 100 pounds in weight.

The following table will be used in determining the minimum allowable weight and chest measurements relative to height:

Table of physical proportions for height, weight, and chest measurements.

Height.	Weight.	Chest measurement (at expiration).
Ft. in.	*Pounds.*	*Inches.*
4 11/12 = 59	100	28½
5 0 = 60	101	28¾
5 1/12 = 61	102	29
5 2/12 = 62	103	29¼
5 3/12 = 63	105	29½
5 4/12 = 64	107	29¾
5 5/12 = 65	110	30
5 6/12 = 66	113	30¼
5 7/12 = 67	118	30½
5 8/12 = 68	124	30¾
5 9/12 = 69	127	31
5 10/12 = 70	130	31¼

Chest measurement at expiration should be taken under conditions of normal respiratory effort. Chest mobility and measurement at inspiration will be taken, but will not be used as data for rejection of a candidate for enlistment, unless they are such as to indicate abnormality or pathological conditions.

In the case of an especially desirable applicant who is active, has firm muscles, and is evidently vigorous and healthy, who varies from the established standard, special authority for the enlistment may be requested from these headquarters.

The results of the examinations of applicants for enlistment in the Philippine Scouts are given in the following table and are of interest as showing the anthropometrical characteristics of the Philippine races. The proportion of recruits accepted to those examined was lower in 1912 than in 1911, being 95.05 per cent as compared with 97.6. The total number examined in 1912 was 870, as compared with 2,296 for 1911.

TABLE NO. 59.—*Examination of Philippine applicants for enlistment, year 1912.*

	Number.	Ratio per 1,000 examined.
Examined by medical officers	870	1,000.00
Accepted by medical officers	827	950.57
By first enlistment	353	405.75
Other enlistments	474	544.83
Rejected by medical officers	37	42.53
Declined	6	6.90

TABLE No. 60.—*Philippine recruits (accepted).*

	Number.	Ratio.		Number.	Ratio
18 years and under	10	12.09	31 years	32	38.69
19 years	19	22.97	32 years	19	22.97
20 years	16	19.35	33 years	13	15.72
21 years	126	152.36	34 years	12	14.51
22 years	60	72.55	35 years	18	21.77
23 years	32	38.69	36 years	5	6.05
24 years	114	137.84	37 years	9	10.88
25 years	89	107.62	38 years	5	6.05
26 years	54	65.30	39 years	3	3.63
27 years	60	72.55	40 years and over	5	6.05
28 years	48	58.04			
29 years	43	52.00	Total	827	1,000.00
30 years	35	42.32			

Fifty-six and five-tenths per cent were 25 years of age or under.

TABLE No. 61.—*Philippine recruits—Relation of height to age.*

ABSOLUTE NUMBERS, YEAR 1912.

Height.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
4 feet, 11 inches						1	2		1	4
5 feet	2		1	4	2		8	4	10	31
5 feet 1 inch	3	2	2	12	4	4	12	10	29	78
5 feet 2 inches		4	2	29	13	4	10	13	46	121
5 feet 3 inches	1	4	4	20	14	4	25	16	83	171
5 feet 4 inches	1	3	1	29	9	7	22	15	72	159
5 feet 5 inches	3	2	4	14	5	5	17	15	41	106
5 feet 6 inches		3	1	8	7	1	11	10	33	74
5 feet 7 inches			1	3	2	4	3	2	24	39
5 feet 8 inches				2		1	2	2	11	18
5 feet 9 inches				3	3		2	1	7	16
5 feet 10 inches		1		2	1	1		1	3	9
5 feet 11 inches and over									1	1
Total	10	19	16	126	60	32	114	89	361	827

PROPORTIONATE NUMBERS, YEAR 1912.

4 feet 11 inches						31.25	17.54		2.77	4.84
5 feet	200.00		62.50	31.75	33.33		70.18	44.95	27.70	37.48
5 feet 1 inch	300.00	105.26	125.00	95.24	66.67	125.00	105.26	112.36	80.33	94.31
5 feet 2 inches		210.53	125.00	230.16	216.67	125.00	87.72	146.07	127.42	146.30
5 feet 3 inches	100.00	210.53	250.00	158.73	233.33	125.00	219.30	179.78	229.92	206.77
5 feet 4 inches	100.00	157.89	62.50	230.16	150.00	218.75	192.98	168.54	199.45	192.26
5 feet 5 inches	300.00	105.26	250.00	111.11	83.33	156.25	149.12	168.54	113.57	128.17
5 feet 6 inches		157.89	62.50	63.50	116.67	31.25	96.50	112.36	91.42	89.48
5 feet 7 inches			62.50	23.81	33.33	125.00	26.32	22.47	66.48	47.16
5 feet 8 inches				15.87		31.25	17.54	22.47	30.47	21.77
5 feet 9 inches				23.81	50.00		17.54	11.24	19.39	19.35
5 feet 10 inches		52.63		15.87	16.67	31.25		11.24	8.31	10.88
5 feet 11 inches and over									2.77	1.21
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

Forty-eight and nine-tenths per cent of all recruits were 5 feet 3 inches or less, which is below the minimum standard for American soldiers. Five and three-tenths per cent were above the average height of American recruits.

TABLE No. 62.—*Philippine recruits—Relation of weight to age.*

ABSOLUTE NUMBERS, YEAR 1912.

Weight.	Age.									
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	Total.
99 pounds and under	3	2	1	4	1	.....	2	2	8	23
100 to 104 pounds	1	4	2	19	7	2	12	3	22	72
105 to 109 pounds	2	4	2	20	16	5	12	17	45	123
110 to 114 pounds	1	3	3	27	11	1	17	19	60	142
115 to 119 pounds	1	4	5	25	8	9	20	16	73	161
120 to 124 pounds	.....	2	1	19	7	7	17	10	54	117
125 to 129 pounds	.....	.....	1	6	3	3	12	5	48	78
130 to 134 pounds	1	.....	1	2	2	4	14	11	22	57
135 to 139 pounds	.....	.....	.....	3	2	1	5	3	14	28
140 to 144 pounds	1	.....	.....	1	2	.....	2	2	7	15
145 to 149 pounds	.....	.....	.....	.....	.....	.....	1	.....	3	4
150 to 154 pounds	.....	.....	.....	.....	.....	.....	.....	.....	2	2
155 to 159 pounds	.....	.....	.....	.....	1	.....	.....	.....	2	3
160 pounds and over	.....	.....	.....	.....	.....	.....	.....	1	1	2
Total	10	19	16	126	60	32	114	89	361	827

PROPORTIONAL NUMBERS, YEAR 1912.

99 pounds and under	300.00	105.26	62.50	31.75	16.67	.....	17.54	22.47	22.16	27.81
100 to 104 pounds	100.00	210.53	125.00	150.79	116.67	62.50	105.26	33.71	60.94	87.06
105 to 109 pounds	200.00	210.53	125.00	158.73	266.67	156.25	105.26	191.01	124.65	148.73
110 to 114 pounds	100.00	157.89	187.50	214.29	183.33	31.25	149.12	213.48	166.20	171.70
115 to 119 pounds	100.00	210.53	312.50	198.41	133.33	281.25	175.44	179.78	202.22	194.68
120 to 124 pounds	.....	105.26	62.50	150.79	116.67	218.75	149.12	112.36	149.58	141.47
125 to 129 pounds	.....	.....	62.50	47.62	50.00	93.75	105.26	56.18	132.96	94.31
130 to 134 pounds	100.00	.....	62.50	15.87	33.33	125.00	122.81	123.60	60.94	68.92
135 to 139 pounds	.....	.....	.....	23.81	33.33	31.25	43.86	33.71	31.58	33.86
140 to 144 pounds	100.00	.....	.....	7.94	33.33	.....	17.54	22.47	19.39	18.14
145 to 149 pounds	.....	.....	.....	.....	.....	.....	8.77	.....	8.31	4.84
150 to 154 pounds	.....	.....	.....	.....	.....	.....	.....	.....	5.54	2.42
155 to 159 pounds	.....	.....	.....	.....	16.67	.....	.....	.....	5.54	3.63
160 pounds and over	.....	.....	.....	.....	.....	.....	.....	11.24	2.77	2.42
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

It will be observed that the weight of 86.6 per cent of all recruits is 128 pounds or under, the minimum standard for American recruits. Only 1.3 per cent were the average weight of American recruits or above the average weight.

TABLE No. 63.—*Philippine recruits—Relation of chest measurement to age.*

ABSOLUTE NUMBERS, YEAR 1912.

Chest measurement.	Age.									
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	Total.
26 inches and under										
27 inches	2									2
28 inches	1		2	6		1	4	1	4	19
29 inches	2	6	4	16	6	3	8	12	36	93
30 inches	2	3	3	38	19	3	26	23	71	188
31 inches	1	10	4	31	14	8	29	23	96	216
32 inches	2		2	22	8	12	26	12	75	159
33 inches				9	8	4	15	17	52	105
34 inches			1	3	1	1	2	1	20	29
35 inches				1	2		3		1	7
36 inches and over					2		1		6	9
Total	10	19	16	126	60	32	114	89	361	827

PROPORTIONAL NUMBERS, YEAR 1912.

26 inches and under										
27 inches	200.00									2.42
28 inches	100.00		125.00	47.62		31.25	35.09	11.24	11.08	22.97
29 inches	200.00	315.79	250.00	126.98	100.00	93.75	70.18	134.83	99.72	112.45
30 inches	200.00	157.89	187.50	301.59	316.67	93.75	228.07	258.43	196.68	227.33
31 inches	100.00	526.32	250.00	246.03	233.33	250.00	254.39	258.43	265.93	261.18
32 inches	200.00		125.00	174.60	133.33	375.00	228.07	134.83	207.78	192.26
33 inches				71.43	133.33	125.00	131.58	191.01	144.04	126.96
34 inches			62.50	23.81	16.67	31.25	17.54	11.24	55.40	35.07
35 inches				7.94	33.33		26.32		2.77	8.46
36 inches and over					33.33		8.77		16.62	10.88
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

The minimum standard chest measure for American recruits is 32 inches at expiration. Sixty-two and six-tenths per cent of all Philippine recruits have a chest measurement below this standard.

Table No. 64 gives the causes for rejection among the 870 applicants for enlistment examined by medical officers during the year.

TABLE No. 64.—*Causes of rejection of Philippine applicants for enlistment, year 1912.*

	Total.			Total.	
	Number.	Ratio per 1,000 rejected for all causes.		Number.	Ratio per 1,000 rejected for all causes.
Tuberculosis	10	270.70	Diseases of the ear	1	27.03
Venereal diseases	3	81.08	Diseases of the respiratory system	1	27.03
Diseases of the digestive system	3	81.08	Diseases of the organs of locomotion	1	27.03
Under weight	3	81.08	Under height	1	27.03
Chest development insufficient	3	81.08	Defects of development	1	27.03
Defects of vision	3	81.08	Causes not physical	1	27.03
General diseases	2	54.05			
Varicose veins	2	54.05	Total	37	1,000.00
Heart disease	2	54.05			

Ten were rejected for tuberculosis in 1912 and 5 in 1911; 3 for venereal disease in 1912 and 10 in 1911; 3 for diseases of the digestive system in 1912 and 11 in 1911. Although the standard for weight is low, 3 out of the 37 rejections were for under weight in 1912.

PORTO RICAN TROOPS.

Seventy-seven and two-tenths per cent of the recruits for the Porto Rican regiment examined by medical officers were accepted, as compared with 79.5 per cent in 1911. Three hundred and sixteen applicants were examined and 244 accepted. Of the accepted applicants 55.3 per cent were 25 years of age or under. In height 56.5 per cent were 66 inches or under and only 30 reached the height of 69 inches; 74.2 per cent were under the average height of American recruits. Forty-three and four-tenths per cent weighed less than 130 pounds, and 30 weighed 150 pounds or over. Sixty-five and seven-tenths had a chest measurement of 33 inches or under, and 14.7 per cent had a chest measurement of 35 inches or over, as compared with 13.2 per cent for last year.

TABLE NO. 65.—*Causes of rejection of applicants for enlistment, Porto Rican regiment, year 1912.*

	Total.			Total.	
	Number.	Ratio per 1,000 rejected for all causes.		Number.	Ratio per 1,000 rejected for all causes.
Under weight	16	225.35	Heart disease	2	28.17
Flat feet	8	112.68	Diseases of the respiratory system	2	28.17
Chest development	8	112.68	Over weight and obesity	2	28.17
Defects of development	7	98.59	Causes not physical	2	28.17
Defects of vision	6	84.51	Diseases of the organs of locomotion	1	14.08
Venereal diseases	3	42.25	Diseases of the skin	1	14.08
Defective teeth	3	42.25	Varicose veins	1	14.08
Hernia	3	42.25			
Diseases of the genito-urinary system	3	42.25	Total	71	1,000.00
Under height	3	42.25			

Twenty-two and five-tenths per cent of the rejections were caused by a deficiency in weight, 11.3 by flat feet, and the same number by insufficient chest development; 9.9 by defects of development and 8.5 per cent by defects of vision. Venereal deseases caused 4.2 per cent of rejections as compared with 2.4 per cent in 1911.

CONCLUSION.

This report is the last which will be signed by the present Surgeon General, on account of his retirement for age during the current fiscal year, after an incumbency of five years four and one-half months. It seems advisable, therefore, that a brief summary be made of the work done by the Medical Department and of the results obtained under his administration.

1. Typhoid fever, the most formidable of all camp diseases in the past, has apparently practically ceased to be a cause of noneffectiveness in our Army. This as is well known is the brilliant result of the immunization of our Army against this disease by the typhoid

prophylactic. It was demonstrated in the maneuver camp at San Antonio in 1911 that it was entirely practicable to immunize a division upon mobilization without materially interfering with the military duties. The same can be done for any number of divisions. Thus if at any time it becomes necessary to mobilize a large army of militia and volunteers they can be properly protected against this disease in a short time after arrival in camp.

The first steps in this campaign were inaugurated by my predecessor, Gen. O'Reilly, in the latter part of 1908, and has been conducted to the present stage by the Medical Corps during my incumbency. I consider that, among the sanitary achievements of the Medical Department in preventive medicine, this measure for the prevention of this disease ranks second in importance only to the discovery of the method of transmission of yellow fever.

2. It appears, as stated elsewhere in this report, that at last effective measures have been instituted to control the occurrence of venereal diseases. Practically the first note of this campaign was sounded in a circular letter from this office January 25, 1909. Since that time a vigorous campaign has been conducted, interest throughout the Medical Department and the Army at large has been aroused. The War Department was finally persuaded to take official action in 1912, and Congress, at the suggestion of this office, passed the act for the stoppage of pay in 1912. The statistics for the year 1912 and for the first six months of 1913 show that the results obtained are eminently satisfactory and would indicate that we may hope for still more satisfactory results in the future. Great credit is due to certain enthusiastic medical officers for especially good work done during this campaign.

3. Prior to the year 1910 among the native troops in the Philippine Islands, beriberi each year caused a large number of admissions to sick report and much noneffectiveness. This disease was also responsible for the greatest number of deaths, and was second only to tuberculosis as a cause for discharge for disability. Experiments conducted by several observers, and confirmed by the board for the study of tropical diseases in the Philippine Islands, showed that beriberi occurred among peoples subsisting largely on highly-milled rice. As a result of recommendations by the board, orders were issued by the division commander and later by the War Department prescribing that only unpolished rice be issued and that a legume be added to the ration. Following the change in the ration beriberi has practically disappeared from among these troops. Only three cases occurred in 1911 and two in 1912.

4. As the result of constantly improving sanitary measures, the constantly noneffective and admission rates have steadily declined since the Spanish-American War. During the last few years as the result of the antityphoid and venereal campaigns these rates have decreased more rapidly, and in 1912 were the most satisfactory on record. This year, 1913, bids fair to eclipse all records and it would seem at the present time that these rates this year would reach an almost irreducible minimum.

5. Camp sanitation has been improved, simplified, and rendered inexpensive. It is being demonstrated each day that troops properly protected against typhoid fever and smallpox can live in camps suitably located, with the present method of camp sanitation, for an indefinite length of time with no increase in morbidity or mortality.

6. The mobilization of the maneuver division at San Antonio in 1911, first brought into evidence the remarkable progress which has been made by the Medical Department in organization since the Spanish-American War. There for the first time a division appeared with a complete modern sanitary organization and with its full quota of field hospitals and ambulance companies in addition to the regimental medical service. The full-field medical equipment was on the field before all of the troops had arrived.

7. The act of Congress of April 23, 1908, reorganizing the Medical Corps authorized the Medical Reserve Corps. The enrollment of civilian physicians in this corps, begun by my predecessor, has been continued during my administration. On June 30, 1913, there were enrolled in this corps 105 physicians on the active list and 1,100 on the inactive list. Included in this list are many of the most prominent medical men in this country. When the division was mobilized, at San Antonio in 1911, it was found that in nearly every instance it was necessary to leave a medical officer at each post to care for the sick left behind. It was then decided that a reserve corps commission should be issued to some civilian physician in the immediate vicinity of each post who could be called in in an emergency at any time. It is now practicable to order all medical officers on duty at the posts at once into the field, the sick remaining being cared for by the Medical Reserve Corps officers.

It was demonstrated that this plan is very satisfactory when the Second Division was mobilized at Texas City and Galveston in February, 1913.

8. An act of Congress of March 3, 1911, which had been proposed by this office, reorganized the Dental Corps of the Army. This corps when filled will furnish a sufficient number of dentists to perform fairly satisfactorily the dental work required in the Army.

9 The Army appropriation bill for the fiscal year ended June 30, 1911, partially reorganized the Army Nurse Corps. The pay was increased The favorable influence of this legislation was soon shown, for on June 1, 1910, even before the increase in pay became effective, the corps was filled to its maximum strength of 100, which had not been done before since August 1, 1907. The number was increased July 1, 1911, to 125, and the last Army appropriation bill increased this number to 150. There are now in the service over 130.

FINANCIAL STATEMENT, 1913.[1]

Medical and hospital department, 1913.

Appropriated by act approved Aug. 24, 1912		$700,000.00
Refundments during the year		183.75
Total to be accounted for		700,183.75
Disbursed during the year:		
Expenses of medical supply depots	$1,007.72	
Medical and hospital supplies	408,507.66	
Medical attendance and medicines (except at recruiting stations)	12,292.24	
Medical expenses of recruiting (including medical attendance and medicines at recruiting stations)	6,099.46	
Pay of employees	142,846.20	

[1] The "disbursements" in this statement include settlements with public creditors made by the accounting officers of the Treasury and charged by them to these appropriations.

Disbursed during the year—Continued.		
Hospital laundry	$39,356.37	
Expressage	1,184.50	
Gas and electricity for laboratory apparatus, etc	1,415.04	
Customs duties and internal-revenue taxes on medical supplies	325.80	
Miscellaneous	102.93	
		$513,137.92
Balances on hand June 30, 1913:		
In the United States Treasury	12,639.45	
In transit from disbursing officers to the Treasury	1,314.24	
In hands of disbursing officers—		
New York City	28,076.76	
Washington, D. C	21,112.70	
St. Louis, Mo	5,747.04	
San Francisco, Cal	2,886.60	
Honolulu, Hawaii	745.54	
Manila, P. I	14,523.50	
		87,045.83
Total accounted for		700,183.75

Medical and hospital department, 1912.

Balances on hand July 1, 1912, act Mar. 3, 1911		152,056.89
Refundments during the year		5.31
Total to be accounted for		152,062.20
Disbursed during the year:		
Expenses of medical supply depots	$325.12	
Medical and hospital supplies	91,061.60	
Medical attendance and medicines (except at recruiting stations)	3,329.04	
Medical expenses of recruiting	797.00	
Pay of employees	8,356.92	
Hospital laundry	7,401.84	
Expressage	51.71	
Gas and electricity for laboratory apparatus	187.82	
Customs duties and internal-revenue taxes on medical supplies	154.20	
Miscellaneous	7.04	
		111,672.29
Balance on hand June 30, 1913, in United States Treasury		40,389.91
Total accounted for		152,062.20

Medical and hospital department, 1911.

Balance on hand July 1, 1912, act Mar. 23, 1910		599.40
Disbursed during the year:		
Medical attendance (not at recruiting stations)	$76.00	
Gas and electricity for laboratory apparatus	142.50	
		218.50
Carned to surplus fund		380.90
Total accounted for		599.40

Medical and hospital department, certified claims.

Appropriated by act approved Aug. 26, 1912		66.35
Disbursed during the year:		
Medical attendance at recruiting stations, fiscal year 1908	$26.35	
Professional examination of candidates for commissions as medical officers, United States Volunteers, fiscal year 1898	40.00	
		66.35

Replacing medical supplies, 1913–14 act June 12, 1906, 34 Stats., 256).

Amounts accruing to this fund:		
A. On account of supplies transferred—		
To Quartermaster's Department, and Quartermaster Corps, U. S. Army	$381.64	
To Engineer Department, U. S. Army	87.00	
To Insular Bureau, War Department	150.00	
To Isthmian Canal Commission	10,498.40	
To Navy and Marine Corps	3,754.65	
To Public Health Service	2.00	
To Reclamation Service	169.65	
To Indian Service	16.50	
To States, for the use of the militia	23,098.43	
		$38,158.27
B. On account of supplies sold—		
To States, for the use of the militia	1,599.23	
To Civil Government, Philippine Islands	3.82	
To U. S. Soldiers' Home	12,997.03	
To American National Red Cross	57.81	
To civilian employees and civilians	7,099.30	
		21,757.19
C. On account of collections from carriers and others for medical property lost or destroyed		1,024.82
Total to be accounted for		60,940.28
Balance on hand June 30, 1913, in United States Treasury		60,940.28

Replacing medical supplies, 1912–13.

Balance on hand July 1, 1912		75,414.86
Amounts accruing to this fund:		
A. On account of supplies transferred—		
To Quartermaster's Department, U. S. Army	$20.91	
To Engineer Department, U. S. Army	.50	
To Isthmian Canal Commission	534.38	
To Navy and Marine Corps	1,256.90	
To relief of flood sufferers, Ohio and Mississippi valleys	4,408.07	
To States, for the use of the militia	22,729.84	
		28,950.60
B. On account of supplies sold—		
To States, for the use of the militia	6.25	
To civilian employees and civilians	1,876.01	
		1,882.26
C. On account of collections from carriers and others for medical property lost or destroyed		217.00
Total to be accounted for		106,464.78
Disbursed during the year for medical and hospital supplies		98,959.09
Balances on hand June 30, 1913:		
In United States Treasury	$2,164.83	
In hands of disbursing officer, Washington, D. C.	5,340.86	
		7,505.69
Total accounted for		106,464.78

Replacing medical supplies, 1911–12.

Balance on hand July 1, 1912	17,535.54
Disbursed during the year for medical and hospital supplies	8,273.60
Balance on hand in United States Treasury June 30, 1913	9,261.94

Replacing medical supplies, 1910–11.

Balance on hand July 1, 1912		$35.59
Carried to surplus fund		35.59

Replacing medical supplies destroyed by fire 1910–11.

Balance on hand July 1, 1912, act June 25, 1910		213.18
Disbursed during the year for medical and hospital supplies		207.00
Carried to surplus fund		6.18

Library, Surgeon General's Office, 1913.

Appropriated by act approved Aug. 24, 1912		10,000.00
Disbursed during the year		6,183.33
Balances on hand June 30, 1913:		
In United States Treasury	$1,645.34	
In hands of disbursing officer, Washington, D. C.	2,171.33	
		3,816.67

Library, Surgeon General's Office, 1912.

Balance on hand July 1, 1912, act Mar. 3, 1911		3,203.81
Disbursed during the year		3,184.19
Balance in United States Treasury June 30, 1913		19.62

Library, Surgeon General's Office, 1911.

Balance on hand July 1, 1912, act Mar. 23, 1910		121.33
Carried to surplus fund		121.33

Army Medical Museum, 1913.

Appropriated by act approved Aug. 24, 1912		5,000.00
Disbursed during the year		3,411.44
Balances on hand June 30, 1913:		
In United States Treasury	$600.00	
In hands of disbursing officer, Washington, D. C.	988.56	
		1,588.56

Army Medical Museum, 1912.

Balance on hand July 1, 1912, act Mar. 3, 1911		1,230.34
Disbursed during the year		1,136.23
Balance in United States Treasury June 30, 1913		94.11

Army Medical Museum, 1911.

Balance on hand July 1, 1912, act Mar. 23, 1910		423.80
Carried to surplus fund		423.80

Artificial limbs, 1913.

Appropriated by act approved Aug. 24, 1912		115,000.00
Disbursed during the year		99,579.24
Balances on hand June 30, 1913:		
In United States Treasury	$9,874.76	
In hands of disbursing officer, Washington, D. C.	5,546.00	
		15,420.76

Artificial limbs, 1912.

Balance on hand July 1, 1912, act Mar. 3, 1911	$38,418.67
Disbursed during the year	1,761.13
Balance in United States Treasury June 30, 1913	36,657.54

Artificial limbs, 1911.

Balance on hand July 1, 1912, act June 25, 1910	15,681.41
Refundment during the year	7.00
Total to be accounted for	15,688.41
Carried to surplus fund	15,688.41

Artificial limbs, certified claims.

Appropriated by act approved Aug. 26, 1912	75.70
Disbursed during the year	75.70

Appliances for disabled soldiers, 1913.

Appropriated by act approved Aug. 24, 1912		2,000.00
Disbursed during the year		837.22
Balances on hand June 30, 1913:		
In United States Treasury	$1,100.00	
In hands of disbursing officer, Washington, D. C.	62.78	
		1,162.78

Appliances for disabled soldiers, 1912.

Balance on hand July 1, 1912, act Mar. 3, 1911	1,096.88
Disbursed during the year	64.70
Balance in United States Treasury June 30, 1913	1,032.18

Appliances for disabled soldiers, 1911.

Balance on hand July 1, 1912, act June 25, 1910	945.90
Carried to surplus fund	945.90

Trusses for disabled soldiers, 1913.

Appropriated by act approved Aug. 24, 1912		5,000.00
Disbursed during the year		2,385.95
Balances on hand June 30, 1913:		
In United States Treasury	$2,400.00	
In hands of disbursing officer, Washington, D. C.	214.05	
		2,614.05

Trusses for disabled soldiers, 1912.

Balance on hand July 1, 1912, act Mar. 3, 1911	2,264.62
Disbursed during the year	174.09
Balance in United States Treasury June 30, 1913	2,090.53

Trusses for disabled soldiers, 1911.

Balance on hand July 1, 1912, act June 25, 1910	2,502.30
Carried to surplus fund	2,502.30

General summary of all appropriations.

Balances on hand July 1, 1912	$311,744.52
Appropriated	837,142.05
Proceeds of sales, etc., accruing to replacing funds, act of June 12, 1906 (34 Stats. 256)	91,990.20
Refundments during the year	196.06
Total to be accounted for	1,241,072.83
Disbursed during the year	951,327.97
Carried to the surplus fund	20,104.41
Balances on hand June 30, 1913	269,640.45
Total accounted for	1,241,072.83

VITAL STATISTICS.

The following tables show in detail most of the statistical data upon which the statements in this report are based:

66. Surgical operations performed on American troops.

67. Numerical view of the effect of disease and injury on United States troops serving at home and abroad in the year 1912 as compared with the corresponding data for the year 1911, by races.

68. Admissions to sick report, discharges, and deaths in the Army with ratios per 1,000 of mean strength, in which all available data for the period 1902–1911 is placed in comparison with the year 1912.

69. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, year 1912, for officers and total enlisted, of the Army.

70. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for American troops, of the Army, white, colored, and total, for the year 1912.

71. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the year 1912, United States, continental (excluding Alaska), and separately for white and colored troops serving therein.

72. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the year 1912, enlisted American troops serving in the Philippine Islands.

73. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for enlisted American troops serving in Alaska, Hawaii, and China for the year 1912.

74. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength for enlisted American troops serving in Panama Canal Zone and on Army transports, year 1912.

75. Admissions to sick report, discharges, deaths, and noneffectiveness expressed in ratios per 1,000 of mean strength, for American troops (enlisted men) on duty at home stations, placed in comparison with the same data for those serving at distant stations, year 1912.

76. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for Porto Rican native troops, and Philippine scouts (enlisted men) year 1912.

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on office and enlisted men of the Army during the calendar year 1912.*

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Nitrous oxide.	Local.	
	EYE.											
Extirpation	Penetrating wound of eye	2	2					2				
	Punctured and lacerated wound of eye	1	1								1	
	Punctured wound of cornea with foreign body in posterior chamber	1	1					1				
	Atrophy	1	1					1				
	Syphilitic iritis	1	1					1				
Suture of sclera and conjunctiva	Rupture of eyeball	1	1					1				
Posterior sclerectomy 1 Iridectomy 1	Glaucoma	2	2								2	
Simple extraction	Cataract	1	1								1	
Partial tenotomy internal recti.	Strabismus convergent alternating both eyes.	1		1							1	
Tenotomy complete internal rectus.	Strabismus internal	1	1								1	
Tenotomy external rectus	Squint alternating divergent.	1	1								1	
Tucking internal rectus	Insufficiency of convergence.	1	1								1	
Advancement internal rectus.	Paralysis internal rectus	1	1					1				
Excision and suture 10 Resection 1 Excision and burial of stump 3 Transplantation 6 Fuch's operation 1	Pteryglum	21	21								21	
Incision and dilatation. 3 Incision and drainage 2	Dacryo-cystitis	5	5								3	
Expression and cauterization. 1 Expression 9 Do	Trachoma	10	10					10				
	Follicular conjunctivitis	3	3								3	
Curetment	Exuberant granulations	1	1								1	
Cauterization, actual cautery.	Chronic ulcers, ophthalmic, gonorrheal.	1			1						1	
Incision and drainage	Abcess, conjunctival	5	5								5	
Incision and expression. 3 Incision and curetment. 5 Dissection 1	Chalazion	9	9								9	
Incision	Adhesions conjunctival	1		1							1	
Extraction	Foreign body imbedded in cornea.	6	6								5	
Excision	Meibomian cyst	2	2									
	Adenoma of lid	1	1								1	
	Lipoma of lid	1	1								1	
	Papilloma of lid	1	1								1	
	Sebaceous cyst of lid	1	1								1	
Extraction of bird shot	Gunshot wound, conjunctiva.	1	1								1	
	EAR.											
Schwartze's operation. 2 Mastoidotomy, curetment and drainage 16	Mastoiditis	18	18				5	12		1		
Incision of tympanum. 34 Ossiculectomy and curetment 1 Paracentesis 20	Otitis media	55	52	3			23	6		13	5	
Incision and drainage	Otitis externa	2	2								2	
Excision	Polypus, aural	2	2					2				
Removal of bony growth	Exostosis	1	1					1				

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1912*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Nitrous oxide.	Local.	None.
	NOSE.											
Resection of septum.... 2 Resection middle turbinal..... 1 Barth's drainage through nostril..... 1	Sinusitis.....	4	4	...	...	...	....	2	....	....	2	...
Opening chiseled into both sinuses.	Myiasis larvæ frontal sinus	1	1	...	...	...	....	1	....	....	.....	...
Extraction upper second bicuspid..... 1 Extraction upper first molar..... 1 Enlargement of alveolar sinus..... 1	Empyema antrum of Highmore.	3	3	...	...	...	....	2	....	....	1	...
Opening of antrum.....	Myiasis larvae antrum of Highmore.	1	1	...	...	...	....	1	....	....	.....	...
Binnie's plastic operation..	Saddle nose deformity.....	1	1	...	...	...	....	1	....	....	.....	...
Excision of deflected portion..... 3 Section and forcible straightening..... 1 Submucous resection.. 34 Resection of spur..... 1 Ballinger's operation.. 1	Deflection of septum.....	40	40	...	...	...	....	2	....	....	38	...
Submucous resection.....	Deviation of septum.....	70	70	...	...	...	....	.....	....	....	70	...
Turbinectomy..... 22 Resection of turbinal.. 4 Linear cauterization... 5 Kyle's operation..... 1	Hypertrophy of turbinals..	31	31	...	...	...	....	.....	....	....	31	...
Excision middle turbinal..... 2	Hypertrophic rhinitis.....	3	3	...	...	...	....	1	....	....	2	...
Jarvis's operation..... 1 Removal with snare... 12	Polypus.....	13	13	...	...	...	....	.....	....	....	13	...
Turbinectomy, partial. 1 Submucous excision... 2 Excision..... 13	Septal spur.....	16	16	...	...	...	....	1	....	....	15	...
Excision with saw and snare.	Bony septal spur.....	4	4	...	...	...	....	.....	....	....	4	...
Excision by dissection....	Papilloma anterior nares...	1	1	...	...	...	....	.....	....	....	1	...
Excision for laboratory diagnosis.	Papillo-fibroma.....	1	1	...	...	...	....	.....	....	....	1	...
Removal with curet and forceps.	Adenoids, post nasal.....	18	18	...	...	...	....	4	....	....	2	12
Excision.....	Exostosis.....	1	1	...	...	...	....	.....	....	....	1	...
Do.....	Necrosis, bone bridge of nose.	1	1	...	...	...	....	.....	....	....	1	...
Resection of skin and subcutaneous tissue.	Atresia partial, nasal openings.	2	2	...	...	...	....	2	....	....	.....	...
	MOUTH AND PHARYNX.											
Excision.....	Epithelioma, lower lip....	1	1	...	...	...	....	1	....	....	.....	...
Do.....	Papilloma, lower lip.....	1	1	...	...	...	....	1	....	....	.....	...
Plastic flap transplantation from nose to roof of mouth.	Cleft palate, mouth and left nostril.	1	1	...	...	...	....	.....	....	....	1	...
Curetment.....	Alveolar sinus.....	1	1	...	...	...	....	1	....	....	.....	...
Division of frenum.....	Tongue tie.....	1	.....	1	...	...	....	.....	....	....	.....	1
Adenectomy.....	Adenitis submaxillary (salivary).	1	1	...	...	...	....	1	....	....	.....	...
Incision and drainage.....	Abscess, submaxillary.....	6	6	...	...	...	....	1	....	....	2	3
Do.....	Abscess, sublingual.....	1	1	...	...	...	1	.....	....	....	.....	...
Do.....	Abscess, floor of mouth...	1	1	...	...	...	....	.....	....	....	.....	1
Dissection and curetment.	Calculus of tonsil.....	1	1	...	...	...	....	.....	....	....	1	...
Tonsillectomy, complete..	Tonsillitis, hypertrophic ..	8	8	...	...	...	....	5	....	....	.....	3
Tonsillectomy.....	Tonsillitis.....	80	79	1	...	...	2	12	1	....	59	6
Do.....	Hypertrophy of tonsil.....	137	137	...	...	...	4	40	1	....	88	4

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1912*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Nitrous oxide.	Local.	None.
	MOUTH AND PHARYNX—con.											
Incision and evacuation 20 Incision 2½ inches long, anterior border sternomastoid, deep dissection and evacuation 1	Abscess of tonsil	21	21				1				9	1
Incision and drainage	Abscess, peritonsillar	66	66					1			45	20
Do	Ludwig's angina	1	1					1				
Uvulectomy	Elongated uvula	3	3								3	
Adenectomy 12 Curetment 5	Adenoids	17	17					7		1	9	
	NECK AND THORAX.											
Tracheotomy	Stricture of larynx	1	1					1				
Do	Laryngitis	1	1								1	
Extirpation, extra capsular 1 Extirpation, right lobe and isthmus 1 Thyroidectomy 1	Goiter	3	2			1		3				
Do	Goiter, exophthalmic	2	2					2				
Paracentesis 1 Resection of rib 14 Thoracotomy 1	Empyema	16	13	3			1	6		5	4	
Do	Empyema, tuberculous	1	1						1			
Paracentesis 4 Aspiration 16 Pleurotomy 1	Pleurisy	21	21								15	6
Resection of rib and drainage.	Pleurisy, tuberculous	1		1							1	
Paracentesis	Hemathorax	2	2								2	
Aspiration	Lympho-sarcoma, anterior mediastinum.	6	6									6
Tracheotomy, osteoplastic resection of parietal bones, and ligation of longitudinal sinus.	Gunshot wound of neck and head.	1	1									1
Extraction of bullet	Gunshot wound of neck	1				1						1
Closure of wound	Incised wound of neck	1	1									1
Suturing 1 Aspiration 1	Stab wound of thorax, penetrating.	2	2									2
	ABDOMEN.											
Laparotomy and repair 1 Gastroenterostomy 1	Ulcer of stomach	2	1			1		2				
Laparotomy and gastrorrhaphy	Ulcer of stomach with perforation.	1	1					1				
Gastroenterostomy	Ulcer of duodenum	1	1					1				
No-loop posterior gastrojejunostomy (Mayo).	Pyloric stenosis, due to old scar tissue.	1	1					1				
Laparotomy, exploratory	Pyloric ulcer with adhesions.	1		1				1				
Laparotomy	Perforation of typhoid ulcer.	1				1		1				
Do	Tumor, inoperable, epigastric region.	1				1		1				
Abdominal section	Sarcoma, mesenteric glands with metastasis in omentum.	1	1					1				
Paracentesis	Carcinomatosis, abdominal general with ascites.	1		1							1	
Laparotomy for relief of ascites.	Papillary carcinoma whole visceral and parietal peritoneum.	2	2					1			1	
Laparotomy, exploratory	Tumor involving cecum, appendix and mesentery	1			1			1				

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1912*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Nitrous oxide.	Local.	None.
	ABDOMEN—continued.											
Laparotomy and dissection of adhesions.	Intestinal and omental adhesions.	.....	1	...	...	...	....	1	...	...	...	...
Do	Adhesions involving omentum, gall bladder, and adjacent structures, following traumatic laceration of liver.	1	1	...	...	...	....	1	...	...	...	...
Laparotomy, adhesions broken up, and raw surfaces covered with liquid vaseline.	Adhesions, transverse and and descending colon.	1	1	...	...	...	....	1	...	...	...	...
Ileocolostomy	Tuberculous ileum and colon.	1	1	...	...	...	....	1	...	...	...	...
Laparotomy, exploratory	Tuberculous peritonitis	2	4	...	...	...	....	4	...	...	...	...
Laparotomy and drainage		2										
Ileostomy		1										
Formation of fecal fistula	Intestinal obstruction	1	4	...	...	2	....	4	...	...	...	...
Laparotomy and reduction		2										
Laparotomy, exploratory	Aneurism	1	...	...	1	...	....	1	...	...	...	...
Laparotomy and drainage	Internal hemorrhage, due to wagon passing over abdominal and pelvic regions.	1	1	...	...	...	....	1	...	...	...	...
Laparotomy exploratory	Abdominal hemorrhage	1	1	...	...	...	....	1	...	...	...	...
Do		2										
Abdominal section, ligation of wound of liver and suture of intestinal perforations	Gunshot wound of abdomen.	1	4	...	...	1	....	4	...	...	...	...
Laparotomy		1										
Laparatory, exploratory	Stab wound of abdomen	1	1	...	...	...	....	1	...	...	...	...
Laparotomy and drainage	Punctured wounds of abdomen.	1	1	...	...	...	.....	.....	...	...	1	...
Aspiration	Subphrenic abscess	1	3	...	...	1	....	2	1	...	...	...
Incision and drainage		1										
Incision and drainage, trans-pleural route		1										
Splenectomy	Banti's disease	1	1	...	...	...	....	1	...	...	...	...
Cholecystotomy	Cholecystitis	6	13	...	...	...	....	13	...	...	...	...
Cholecystectomy		3										
Cholecystostomy		4										
Do		1										
Cholecystectomy	Cholelithiasis	1	3	...	...	...	....	3	...	...	...	...
Removal of gall stones		1										
Laparotomy and drainage	Abscess of liver	9	25	...	2	2	....	25	...	...	...	...
Thoracic route, resection of rib		10										
Right lumbar, incision		2										
Kocher's incision		1										
Laparotomy, exploratory		3										
Do	Suspected abscess of liver	2	2	...	...	...	....	2	...	...	...	...
Right rectus incision for diagnosis.	Syphilitic liver	1	1	...	...	...	....	1	...	...	...	...
Laparotomy, evacuation blood clot, packing and drainage.	Rupture of liver	1	1	...	...	...	....	1	...	...	...	...
Appendectomy	Appendicitis	342	349	1	...	7	21	332	4	...	...	...
Appendectomy and repair of hernia		1										
Laparotomy and drainage of abscess		13										
Laparotomy, exploratory		1										

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1912*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Nitrous oxide.	Local.	None.
	ABDOMEN—continued.											
Excision of sinus and removal of stump of appendix.	Appendicular sinus from stump, with irritating ligature from previous operation.	1	1					1				
Laparotomy and freeing of adhesions.	Adhesions following appendectomy.	2	2					2				
Laparotomy and drainage.	Abscess acute following appendectomy.	1	1					1				
Bassini's operation... 182 Bassini's modified operation..... 18 Ferguson's operation. 15 Ferguson's modified operation..... 6 Halstead's operation. 5 Andrew's operation.. 3 Keen's operation..... 1 Mayo's operation..... 1 McEwen's operation. 1 Operation not stated. 6	Inguinal hernia.....	238	238				8	224	2		4	
Cutting of constricting band..... 1 Strangulated coil freed and returned to abdomen and fault in wall repaired..... 1	Inguinal hernia, strangulated.	2	2					1			1	
Bassini's modified operation.	Inguinal hernia, recurrent.	1	1					1				
Bassini's operation.....	Femoral hernia.....	2	2					1	1			
Mayo's operation..... 4 Operation not stated... 3	Ventral hernia (4 following appendectomy).	7	6		1		1	6				
Repair of abdominal wall..	Ventral hernia recurrent..	2	2					2				
Ferguson's modified operation.	Protuberant parietal peritoneum due to congenital defect.	1	1					1				
Incision and drainage.....	Abscess iliac fossa.....	1	1					1				
	ANUS AND RECTUM.											
Colostomy.....	Adhesions of rectum.....	1	1					1				
Incision and drainage.....	Peri-rectal abscess	5	5								5	
Do..... 43 Incision, curetment, and drainage..... 3	Ischio-rectal abscess.....	46	44	2			2	17	5		14	
Incision and drainage.....	Abscess of rectum.....	1	1					1				
Incision and curetment....	Ischio-rectal fistula.....	2	2					2				
Thermo-cauterectomy.....	Prolapse of rectum.....	1	1						1			
Excision.....	Polypus of rectum.....	1	1					1				
Excision and curetment..... 13 Excision, curetment, and packing..... 6 Tract laid open with cautery..... 6 Excision and packing. 2 Dissection of tract..... 2 Excision..... 6 Dilatation..... 1 Fistulotomy distal to sphincter..... 1	Fistula in ano.....	37	37				2	33			2	

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1912*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Nitrous oxide.	Local.	None.
	ANUS AND RECTUM—CON.											
lamp and cautery.... 72 igation, clamp, and cautery..... 11 igation and cautery.. 1 xcision and cautery.. 6 xcision, cautery, and suture..... 1 lamp and suture..... 2 lamp, excision, and suture..... 1 lamp and ligation.... 1 lamp and excision... 1 xcision..... 23 xcision and curetment..... 3 xcision and ligation.. 44 xcision and suture... 27 ncision and removal of clot..... 25 ncision and curetment..... 5 ncision and ligation... 4 igation..... 6 igation and excision.. 49 llingham's operation. 11 eller's operation..... 1 dcher's operation..... 5 hewell-Thomas's operation..... 1 ncision and cauterization..... 3	Hemorrhoids.....	303	303	...	...	...	34	177	9	....	78	5
retment and packing 1 rcible dilatation..... 2 uterization..... 2 ilatation and cauterization..... 2	Fissure of anus.....	7	7	...	...	...	....	6	1	....	.....	...
xcision.....	Papilloma circum-anal....	1	1	...	...	...	....	1	....	....	.....	...
xcision and suture.....	Condyloma of anus.....	2	2	...	...	...	....	1	....	....	1	...
	GENITO-URINARY SYSTEM.											
xcision left, and resection right..... 1 chidectomy..... 3	Tuberculosis of testicle....	4	4	...	...	...	....	4	....	....	.....	...
Do.....	Fibroma of testicle.....	1	1	...	...	...	....	.....	....	....	1	...
Do.....	Fibro-sarcoma of testicle...	1	1	...	...	...	....	1	....	....	.....	...
Do.....	Sarcoma of testicle.....	2	2	...	...	...	....	2	....	....	.....	...
chotomy.....	Carcinoma of testicle.....	1	.....	...	1	...	....	.....	1	....	.....	...
Do..... 1 chidectomy..... 1	Syphilis of testicle.....	2	2	...	...	...	....	2	....	....	.....	...
Do.....	Orchitis, chronic.....	2	2	...	...	...	....	2	....	....	.....	...
Do..... 1 chotomy..... 1	Undescended testicle.....	2	2	...	...	...	....	2	....	....	.....	...
ploratory incision, cremaster severed.	Retracted testicle.....	1	1	...	...	...	....	.....	....	....	1	...
gh excision of veins 107 w excision of veins. 2 section of veins.... 3 cision of veins, site not stated..... 11 dical cure, open operation..... 5 nnett's operation.. 1 en's operation..... 3 eration not stated. 2	Varicocele.....	134	134	...	...	...	5	109	1	....	19	...
section.....	Varicocele and redundant scrotum.	1	1	...	...	...	....	1	....	....	.....	...

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1912*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Nitrous oxide.	Local.	None.
	GENITO-URINARY SYSTEM—continued.											
Inversion of tunic..... 1 Inversion and excision of tunic..... 9 Excision of sac..... 6 Excision and ligation... 1 Aspiration..... 3 Tapping..... 2 Incision and drainage... 2 Orchidectomy..... 1 Radical cure..... 2 Incision, tunic stitched to skin, drainage..... 1 Andrews's bottle operation..... 9 Bassini's operation..... 1 Jaboulay's operation... 9 Loguet's operation..... 2 Valkman's operation... 1 Von Bergmann's operation..... 3 Incision exploratory.... 1	Hydrocele.....	54	52	1	1	...	4	40	....	....	6	
Excision.....	Spermatocele.....	1	1	....	....	....	....	1	....	....	....	
Incision and drainage.....	Hematocele.....	1	1	....	....	....	1	....	....	....	....	
Do..... 3 Aspiration..... 1 Epididymectomy..... 7 Epididymotomy..... 14 Hagner's modified operation..... 6 Exploratory incision and drainage..... 1	Epididymitis, acute.....	32	32	....	....	....	1	19	....	....	10	
Orchidectomy right, and partial epididymectomy left..... 1 Excision..... 2	Epididymitis, chronic tuberculous.....	3	3	....	....	....	....	3	....	....	....	
Scrotum opened, removal of tumor and visceral layer of tunic.	Tumor, type undetermined, tunica vaginalis.	1	1	....	....	....	....	1	....	....	....	
Excision of contused portion of tunic.	Contusion with hematocele.	1	1	....	....	....	....	1	....	....	....	
Nephrectomy.....	Nephritis, tuberculous.....	1	1	....	....	....	....	1	....	....	....	
Do.....	Pyonephrosis.....	1	1	....	....	....	....	1	....	....	....	
Nephrotomy.....	Nephrolithiasis.....	1	1	....	....	....	....	1	....	....	....	
Suture of bladder.....	Rupture of bladder from fall.	1	....	....	....	[1] 1	....	1	....	....	....	
Supra-pubic cystotomy....	Vesical calculus.....	1	1	....	....	....	....	1	....	....	....	
Do.....	Cystitis, chronic.....	1	1	....	....	....	....	1	....	....	....	
Do..... 1 Perineal prostatectomy. 1 Incision and drainage.....	Hypertrophy of prostate (1 senile). Abscess of prostate.....	2 3	1 3	....	....	1	....	2 1	....	....	....	2
Do.....	Abscess, perineal.....	4	4	....	....	....	....	....	....	....	....	2
Perineal section and evacuation of abscess.	Urethro-rectal fistula.....	1	1	....	....	....	....	....	....	....	....	
Incision.....	Perineal fistula.....	1	1	....	....	....	....	....	....	....	....	
Dissection and repair.....	Urinary fistula.....	1	1	....	....	....	....	1	....	....	....	
Incision and drainage.....	Periurethral abscess.....	12	12	....	....	....	....	2	....	....	9	
Do.....	Suburethral abscess.....	2	2	....	....	....	....	....	....	....	....	
Internal urethrotomy .. 1 External urethrotomy.. 3 Rapid dilatation..... 1	Stricture of urethra.....	5	5	....	....	....	4	....	....	....	1	
Excision.....	Polypus of urethra.....	1	1	....	....	....	....	....	....	....	1	

[1] Died 8 days after operation from injury to kidney.

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1912*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Nitrous oxide.	Local.	None.
	GENITO-URINARY SYSTEM—continued.											
Circumcision	Elongated prepuce and redundant prepuce 147; Phimosis and paraphimosis 233; Chancroid 6; Other diseases of foreskin 13; Traumatic phimosis 1	400	400				16	47			334	3
Meatotomy	Constricted meatus	3	3								3	
Incision and drainage	Abscess of scrotum	2	2					1			1	
Curtailment	Relaxed scrotum	1	1					1				
	VASCULAR SYSTEM.											
Ligation and excision	Aneurismal varix occipital region.	1	1					1				
Ligation of vessels	Incised wound of throat	1	1									1
Ligation of artery	Severed palmar arch	1	1					1				
Do	Secondary hemorrhage, brachial artery.	1	1				1					
Incision, removal of large hematoma and packing.	Severed femoral vein	1	1					1				
Schede's varicotomy	Varicose ulcer	1	1					1				
Excision 6; Ligation 2; Multiple ligation 7; Ligation and excision 13; Excision and ligation 1; Trendelenburg's operation 1; Trendelenburg's modified operation 1; Schede's operation 2; Keller's operation 13; Operation not stated 1	Varicose veins	47	46	1			1	40			6	
	NERVOUS SYSTEM.											
Neurectomy, supra orbital nerve.	Neuralgia	1	1								1	
Exploratory, of musculospiral nerve.	Neuritis	1	1								1	
Suturing of severed nerve	Incised wound, severing ulnar nerve.	1	1				1					
	SKIN AND CELLULAR TISSUE.											
Incision and curetment 10; Incision and drainage 370	Abscess	380	379	1			2	20	1	4	205	48
Incision and drainage 75; Multiple incisions 2; Incision and curetment 7; Excision 2	Cellulitis	86	85			1[1]	7	6	2		58	13
Incision and drainage 19; Incision and curetment 5; Crucial incision 1; Excision 1	Carbuncle	26	26					3			18	5
Incision and drainage	Felon	6	6					1			2	3
Do	Whitlow	2	2				1				1	
Do	Streptococcus infection	4	4				2	1			1	
Do	Erysipelas, phlegmonous, scalp.	1	1						1			
Incision and curetment	Phlegmon	1	1				1					
Do	Pyogenic infection	3	3								3	

[1] Died of septicemia.

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1912*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Nitrous oxide.	Local.	None.
	SKIN AND CELLULAR TISSUE—continued.											
Incision and curetment. 1 Incision and drainage... 1 Dissection of tract and drainage..... 2 Removal of scar tissue.. 1 Excision and suture.... 1 Curetment..... 3	Sinus.....	9	8	1	...	...	1	7	....	....	1	...
Incision and curetment...	Fistula.....	3	3	..	...	...	1	1	....	....	1	...
Curetment..... 1 Excision..... 1 Do..... 5	Ulcer.....	2	2	...	...	...	1	1	....	....	.....	...
Removal by blunt dissection..... 1	Callus.....	6	6	...	...	...	....	4	....	....	1	1
Excision.....	Keloid.....	2	2	...	...	...	....	.....	....	....	2	...
Transfixion and constriction.	Nevus.....	1	1	...	...	...	....	1	....	....	.....	...
Cicatrix loosened by dissection.	Adherent scar.....	1	1	...	...	...	....	.....	....	....	1	...
Didot's operation.....	Syndactylism, toes.....	1	.....	1	...	...	....	.....	....	....	1	...
Extirpation..... 1 Avulsion..... 1 Von Bergman's operation..... 1 Excision..... 2	Deformed toe nail.....	5	5	...	...	...	....	1	....	....	4	..
Avulsion..... 50 Excision..... 147 Partial excision..... 76 Excision and curetment..... 2 Anger's operation.... 7 Cotting's operation... 12 Keller's operation.... 17 Von Bergman's operation..... 29 Von Natta's operation 2	Ingrowing toe nail.....	342	342	...	...	...	9	6	....	12	302	13
	LYMPHATIC GLANDS.											
Incision and drainage. 448 Incision and curetment..... 47 Excision with cautery 11 Adenectomy..... 266 Keller's operation.... 4	Adenitis, inguinal venereal..... 549 Adenitis, inguinal nonvenereal..... 133 Adenitis, inguinal, nature not stated..... 39 Adenitis, sundry locations..... 24 Adenitis, location and nature not stated... 23 Adenitis, tuberculous, 8	776	776	...	...	...	42	202	13	....	390	129
	MUSCLE TENDONS, FASCIAE, LIGAMENTS, AND BURSAE.											
Tendino-suture.....	Incised wound of palm, severing tendons of all fingers.	1	1	...	...	...	....	1	....	....	.....	..
Tenorrhaphy.....	Severed tendons.....	6	5	1	...	...	....	1	....	....	1	
Suturing of muscle.....	Severed muscle.....	1	1	...	...	...	1	.....	....	....	.....	..
Incision, freeing of adhesions and suturing.	Incarceration of tendon in palm.	1	.....	...	1	...	....	1	....	....	.....	..
Freeing of adhesions.....	Limitation of flexion, finger.	3	1	...	2	...	....	2	....	....	1	..
Incision of contracted bands of fascia.	Contracture flexor tendons, little finger.	1	.....	...	1	...	....	1	....	....	.....	..
Transplantation of tendon by suturing sheath to posterior tissues.	Dislocation forward of peronei tendons caused by fracture of oscalcis.	1	1	...	...	...	....	1	....	....	.....	..
Plication of internal lateral ligament.	Relaxed internal lateral ligament.	1	1	...	...	...	....	1	....	....	.....	..

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1912*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Nitrous oxide.	Local.	None.
	MUSCLE TENDONS, FASCIAE, LIGAMENTS, AND BURSAE—continued.											
ncision and curetment	Tuberculosis of bursa	1	1				1					
ncision and drainage	Tuberculosis of tendon sheath.	1	1								1	
enotomy of flexor tendons.	Hammer toe	10	10					5			5	
xcision	Ossified tendon, adductor longus (rider's bone).	1	1					1				
xcision of bursa 4 xcision of bony enlargment 8 typical excision 2 ayo's operation 8 eller's operation 4 xcision of sac 4 ncision and drainage 3 spiration 2	Bunion	26	26					21	1		4	
	Bursitis	9	9					2	1		6	
xcision	Bursa	2	2					1			1	
Do 6 ncision and evacuation 1 spiration 1	Ganglion	8	8					4	1		3	
	BONES.											
rephining and elevation of depressed bone.	Fracture, compound, base of skull.	1	1					1				
Do	Fracture, compound, depressed, of skull.	1	1					1				
Do	Fracture of skull	1	1					1				
levation and removal of fragments.	do	1	1					1				
xploration of cranium	Gunshot wound of head	1	1					1				
xploratory incision and elevation of depressed fragments.	Fracture depressed region of frontal sinus.	1	1					1				
adical operation	Fracture depressed of zygoma.	1	1					1				
ncision and elevation	Fracture of malar bone	1	1					1				
ntrum opened and fragments replaced.	Fracture comminuted superior maxilla and malar bones.	1	1					1				
cision and wiring of fragments.	Fracture lower jaw, median line.	1	1					1				
iring of fragments	Fracture lower jaw	5	5				1	4				
Do	Fracture of clavicle	1	1					1				
xcision of beef bone	Nonunion of inserted beef bone in lower maxilla.	1	1					1				
one pegging	Fracture ununited inner condyle humerus.	1			1			1				
emoval of bone plug and of ununited fragment.	do	1	1					1				
retment of sinus and bone cavity.	Necrosis shaft of humerus	1	1					1				
cision and drainage	Gumma of humerus	1	1								1	
rrection and wiring	Fracture of radius, with faulty union.	1	1					1				
esetting and wiring both bones.	Vicious union following fracture forearm.	1	1					1				
xcision of excess of cartilage and partial correction.	Angular deformity following fracture forearm.	1	1					1				
xcision of bony protuberance.	Fracture ununited styloid process ulna.	1	1					1				
xcision of scaphoid	Fracture of carpal scaphoid.	2	2					2				
mplete extirpation of third metacarpal.	Gunshot wound of hand, perforating, with compound comminuted fracture.	1	1									1

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1912*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Nitrous oxide.	Local.	None.
	BONES—continued.											
Trimming of bone and suturing.	Partial amputation of finger.	1	1					1				
Application of Lane plate.	Fracture comminuted femur.	1	1								1	
Do	"T" fracture of femur	1	1					1				
Wiring of fragments	Fracture, compound comminuted, femur.	1	1					1				
Freshening of fragments and resetting.	Fracture of femur, with vicious union.	1	1					1				
Incision and suturing.. 2 Valla's operation..... 1	Fracture of patella	3	3				1	2				
Incision and drainage, with fixation by plaster.	Fracture, compound, tibia and fibula.	1	1					1				
Application of Lane plate.	Fracture ununited of tibia.	1	1					1				
Do	Fracture of tibia	2	2					2				
Exploratory incision	Fracture of tibia and fibula	1	1					1				
	Fracture of tibia, with delayed union.	1	1					1				
Cavity curetted and filled with bone wax.	Osteomyelitis chronic ulna.	1	1					1				
Subperiosteal resection of entire shaft and cavity filled with mostig-moorhof wax.	Osteomyelitis chronic tibia.	1	1					1				
Removal of sequestrum and curetment.	Osteomyelitis fibula	1	1					1				
Incision, curetment, and drainage.	Osteoperiostitis	2	2					2				
Curetment and drainage	Osteomyelitis head of first metatarsal and base of proximal phalanx.	1		1				1				
Removal of Lane plate	Irritant foreign body (tibia Lane plate).	1	1					1				
Removal of 2-inch nail from lower third of tibia.	Pain at site of former fracture of tibia due to nail used in splinting fragments.	1	1					1				
Removal of necrotic area	Necrosis of ulna	1	1					1				
Do	Necrosis superior maxilla	1	1					1				
Incision and drainage	Necrotic sinus superior maxilla.	1	1					1				
Excision of dead bone	Necrosis sternum and costo-chrondral articulation.	1	1					1				
Curetment and drainage	Necrosis tenth and eleventh ribs.	1	1					1				
Incision and curetment	Necrosis phalanx	1	1					1				
Do	Necrosis oscalcis	2	2					2				
Do	Necrosis metatarsal	1	1					1				
Excision of dead bone	Caries metatarsal	1	1					1				
Incision and curetment. 2 Incision and drainage... 4	Periostitis	6	6					3			2	
Incision and removal of growth.	Periostitis, chronic productive femur.	1	1					1				
Excision	Painful sesamoid bone, foot.	1	1					1				
Do	Painful callous from old fracture.	1	1					1				
Sequestrotomy and drainage.	Sequestra, site of old fracture.	2	2					2				
Excision	Exostosis	6	6					5			1	
Do	Osteoma	1	1					1				
	JOINTS.											
Resection of joint	Ankylosis elbow joint	1	1					1				
Freeing of adhesions.... 1 Aspiration and passive motion..... 1	Ankylosis, partial elbow joint.	3	2	1				3				

TABLE NO. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1912*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Nitrous oxide.	Local.	None.
	JOINTS—continued.											
Incision and removal	Loose cartilage elbow joint.	2	2	...	...	...	...	1	...	...	1	...
Arthrotomy, posterior, for suspected pus result negative.	Arthritis, chronic, elbow joint.	1	1	...	...	...	...	1	...	...	...	...
Do	Arthritis, acute, wrist joint	1	1	...	...	...	...	1	...	...	...	...
Incision and reduction	Dislocation both bones elbow.	1	1	...	...	...	1	...	...	...	...	...
Freeing of adhesions and forced massage.	Ankylosis wrist joint	1	...	1	...	...	...	1	...	...	...	...
Resection of joint surfaces.	Ankylosis finger joint	1	...	1	...	...	...	...	1	...	...	...
Excision of joints	Impairment of function, second and third joints, forefinger.	1	1	...	...	...	...	1	...	...	...	..
Reduction and suture	Dislocation compound of thumb.	1	1	...	...	...	...	...	...	...	...	1
Suturing of internal lateral ligaments.	Dislocation of knee joint	1	1	...	...	...	...	1	...	...	...	...
Freeing of adhesions	Ankylosis partial, knee joint.	1	1	...	...	...	...	1	...	...	...	...
Exploration of joint 1 Excision of cartilage 4	Detached semilunar cartilage, knee joint	5	3	...	2	...	...	3	...	...	2	...
Incision, removal of villous material and moderate plication of joint 1 Aspiration 1 Arthrotomy and excision of villi 2	Synovitis, knee joint	4	3	...	1	...	...	3	...	...	1	...
Excision of exostosis 3 Mayo's operation 8 Exploratory operation 1	Hallux valgus	12	11	1	...	...	...	12	...	...	...	...
Resection of metatarsal	Ankylosis following operation for hallux valgus.	1	1	...	...	...	...	1	...	...	...	...
Excision metatarso-phalangeal articulation.	Ankylosis, toe	1	1	...	...	...	...	1	...	...	...	...
Division of flexor tendon and excision of extremity of phalanx 1 Resection of bone 3	Hammer toe	4	4	...	...	...	1	2	...	...	1	...
	AMPUTATIONS.											
Amputation at shoulder	Gangrene of arm	1	...	...	...	1	...	1	...	...	...	...
Amputation, arm, junction upper and middle thirds.	Gunshot wound of arm	1	1	...	...	...	1	...	...	...	...	...
Amputation, arm, lower third.	Incised wound, elbow	1	1	...	...	...	1	...	...	...	...	...
Amputation, hand	Crushing of hand	1	1	...	...	...	1	...	...	...	...	...
Amputation, thigh, junction upper and middle thirds.	Fracture compound of femur with laceration of soft parts.	1	1	...	...	...	1	...	...	...	...	...
Amputation, thigh, lower third.	Fracture comminuted thigh.	1	1	...	...	...	...	...	...	...	1	...
Amputation, thigh, intercondyloid.	Gangrene of leg	1	1	...	...	...	1	...	...	...	...	...
Amputation, leg, middle third.	.....do	1	...	...	1	...	...	1	...	...	...	...
Do	Moist gangrene after gunshot wound.	1	1	...	...	...	...	...	...	...	...	1
Do 1 Amputation, leg, site not stated 1	Crushing of leg	2	1	...	...	1	1	1	...	...	...	...
Do	Osteo-sarcoma tibia	1	1	...	...	...	...	1	...	...	...	...
Do	Ulcer, mixed infection, middle and lower thirds of leg, and ankle.	1	...	...	...	1	...	1	...	...	...	...
Amputation, leg, junction upper and middle thirds.	Crushing of ankle	1	1	...	...	...	...	1	...	...	...	...

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1912*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Nitrous oxide.	Local.	None.
	AMPUTATIONS—continued.											
Amputation, foot	Gangrene, great toe	1	1					1				
Disarticulation of index and middle fingers.	Dry gangrene due to severe lye burn.	1										
Trimming and suturing of stumps and disarticulation, third proximal phalanx.	Amputation traumatic, all fingers left hand at proximal phalangal articulation.	1										
Amputation, mutilated third, fourth, and fifth metacarpo-phalangeal joints, and second finger at middle first phalanx.	Laceration severe, metacarpo-phalangeal junction with destruction of all soft tissues.	1	32				2	16			12	
Amputation of finger	Gunshot wound of finger	11										
Do	Other injury	13										
Do	Painful stump	3										
Do	Osteitis	1										
Do	Suppurative tuberculosis	1										
	Injury to toe	2										
	Displacement of toe	1										
	Partial dislocation of toe	1										
Amputation of toe	Hammer toe	27	35					25			10	
	Other deformity of toe	2										
	Sloughing severe of toe	1										
	Gangrene of toe	1										
	FOREIGN BODIES.											
Incision and extraction (1 failure).	Shell of cartridge	2										
Extraction	Button wire (primer)	1										
Exploratory incision, foreign body not found.	Portion of fishhook	1										
Extraction	Piece of steel	2										
Incision and extraction	Fragment of cartridge	1	36		2		1	12			17	
Do	Bullet	12										
Extraction	Bird shot	2										
Incision and removal	Piece of lead	1										
Do	Piece of needle	4										
Do	Other foreign body	12										
	TUMORS.											
Excision	Epithelioma	1	1					1				
Resection horizontal ramus; portion of beef femur inserted in gap as prosthesis.	Sarcoma, inferior maxilla	1	1					1				
Amputation of breast	Adeno-fibroma	1	1					1				
Incision and cauterization 1 Incision and curetment. 2	Dermoid cyst	3	3					1			2	
Excision	Cyst	4	4					1			3	
Incision and drainage	Cystic tumor	2	2								2	
Extirpation	Calcified lymph node	1	1								1	
Excision 3 Dissection 1	Fibroma	4	4					2			2	
Excision	Fibro-lipoma	2	2								2	
Do	Fibro-myoma	1	1					1				
Do 11 Dissection 2 Incision and enucleation 2 Removal of growth and suturing 1 Amputation of breast, Warren's operation 1	Lipoma	17	17					4			13	
Excision	Papilloma	4	4								4	
Do	Osteoma	2	2					2				

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1912*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Nitrous oxide.	Local.	None.
	TUMORS—continued.											
Excision 35 Excision of capsule 4 Incision and curetment 17 Incision and drainage 7	Sebaceous cyst	63	63	...	...	...	1	...	...	...	62	...
Excision	Tumor, benign, nature not stated.	1	1	...	...	...	...	...	...	...	1	...
Do 1 Dissection 1 Removal and curetment 1	Tumor, type undetermined	3	3	...	...	...	...	1	...	...	2	...
	PLASTIC OPERATIONS.											
Excision and plastic operation.	Ulcer	1	1	...	...	...	...	...	...	...	1	...
Do	Corns	3	3	...	...	...	...	...	...	...	3	...
Thiersch's skin grafting	Lacerated wound with extensive denudation of structures.	1	1	...	...	...	...	1	...	...	...	...
	MISCELLANEOUS.											
Coaptation and suturing	Incised wound	56	56	...	...	...	...	2	...	...	26	28
Cleansing and suturing	Lacerated wound	49	49	...	...	...	1	...	...	...	36	12
Incision and drainage 3 Incision and cauterization 7 Incision and curetment 1	Punctured wound (4 infected)	11	10	1	...	...	...	1	...	...	6	4
Incision and drainage 16 Multiple incision 2 Incision and drainage 1	Infected wounds, nature not stated	18	16	1	1	...	2	2	...	...	7	7
Ligation of arteries, cleansing and suturing 1	Gunshot wound	2	1	...	...	[1] 1	1	1	...	...	...	...
Excision of scar tissue 1 Freeing integument from stump and suture 1	Irritable stump, finger	2	2	...	...	...	...	2	...	...	...	...
Incision and drainage 3 Counter incision for drainage 1	Psoas abscess	4	4	...	...	...	...	4	...	...	...	...
Total number of cases		4,856	4,782	29	20	25	226	1,810	49	36	2,233	502

[1] Died of tetanus.

TABLE NO. 67.—*Numerical view of the effect of disease and injury on United States troops, serving at home and abroad, in the year 1912, compared with corresponding data for the year 1911, by races.*

ABSOLUTE NUMBERS.

		Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Noneffective from sickness.	
			Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Days treated.	Constantly noneffective.
White troops	1912	74,366	60,668	49,669	10,999	1,042	945	97	353	175	178	1,395	1,120	275	814,538	2,225.51
	1911	69,746	65,830	54,236	11,594	969	860	109	328	183	145	1,297	1,043	254	855,289	2,343.26
Colored troops	1912	3,901	3,819	3,106	713	27	25	2	28	14	14	55	39	16	47,683	130.28
	1911	3,002	2,243	1,739	504	42	37	5	20	11	9	62	48	14	28,357	77.69
Porto Rican troops	1912	588	672	610	62	4	4	.....	2	.....	2	6	4	2	6,042	16.51
	1911	580	609	562	47	5	4	1	4	2	2	9	6	3	6,304	17.27
Philippine Scouts	1912	5,407	3,667	3,337	330	45	38	7	24	17	7	69	55	14	40,210	109.86
	1911	5,266	3,922	3,510	412	26	23	3	24	17	7	50	40	10	38,172	104.58

PROPORTIONATE NUMBERS.

		Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Constantly noneffective.	Days treated.	
			Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.		Each soldier.	Each case.
White troops	1912	74.366	815.80	667.90	147.90	13.76	12.48	1.28	4.66	2.31	2.35	18.42	14.79	3.63	29.93	10.95	13.43
	1911	69,746	943.85	777.43	166.23	13.84	12.28	1.56	4.68	2.61	2.07	18.52	14.89	3.63	33.60	12.26	12.99
Colored troops	1912	3,901	978.98	796.21	182.77	6.92	6.41	.51	7.18	3.59	3.59	14.10	10.00	4.10	33.40	12.22	12.49
	1911	3,002	747.17	579.28	167.89	13.99	12.33	1.66	6.66	3.66	2.99	20.65	15.99	4.65	25.88	9.45	12.64
Porto Rican troops	1912	588	1,142.86	1,037.41	105.44	6.80	6.80	.....	3.40	.....	3.40	10.20	6.80	3.40	17.47	10.28	8.99
	1911	580	1,050.00	968.97	81.03	8.62	6.90	1.72	6.90	3.45	3.45	15.52	10.35	5.17	29.78	10.87	10.35
Philippine Scouts	1912	5,407	678.20	617.16	61.04	8.19	6.92	1.27	4.37	3.09	1.27	12.56	10.01	2.54	20.32	7.44	10.96
	1911	5,266	744.78	666.54	78.24	4.94	4.37	.57	4.56	3.23	1.33	9.50	7.60	1.90	19.86	7.25	9.73

TABLE No. 68.—*Admissions to sick report, discharges, and deaths, with ratios per 1,000 of mean strength, in which all available data for the decade ending Dec. 31, 1911, are placed in comparison with the year 1912.*

Causes of admission to sick report.	The Army, 1902-1911. (Enlisted American troops only beginning 1904.)						American troops, Army 1912. (Enlisted men only.)					
Mean strength	S. G. O., 658,315 (mean annual 65.831). A. G. O., 668,388 (mean annual 66,839).						S. G. O., 78,267. A. G. O., 79,613.					
	Admissions.		Discharges.		Deaths.		Admissions.		Discharges.		Deaths.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Typhoid fever	2,639	4.01	9	0.01	226	0.34	21	0.27	.....	.....	2	0.03
Malarial fevers, total	64,879	98.55	19	.03	101	.15	3,131	40.00	.....	.....	4	.05
Intermittent	53,107	80.66	2	.003	4	.01	2,307	29.48	.....	.....	.....	.....
Estivo-autumnal	10,523	15.98	.....	.....	85	.13	702	8.97	.....	.....	4	.05
Other malarial fevers	1,249	1.90	17	.03	12	.02	122	1.56	.....	.....	.....	.....
Smallpox	232	.35	.....	.....	22	.03	6	.08	.....	.....	.....	.....
Measles	6,925	10.52	3	.004	85	.12	508	6.49	6	0.08	13	.16
Eruptive fevers, other	1,254	1.90	.....	.....	3	.004	286	3.65	.....	.....	.....	.....
Diphtheria	325	.49	1	.001	8	.01	79	1.01	.....	.....	.....	.....
Influenza	17,168	26.08	.....	.....	5	.01	1,262	16.12	.....	.....	.....	.....
Asiatic cholera	670	1.02	.....	.....	397	.59	.....	.....	.....	.....	.....	.....
Cholera nostras	212	.32	.....	.....	.....	.....	3	.04	.....	.....	.....	.....
Dysentery	13,193	20.04	317	.47	278	.42	337	4.31	7	.09	2	.03
Yellow fever	30	.05	.....	.....	6	.01	.....	.....	.....	.....	.....	.....
Leprosy	3	.005	2	.003	1	.001	.....	.....	.....	.....	.....	.....
Beriberi	1,275	1.94	13	.02	60	.09	.....	.....	.....	.....	.....	.....
Erysipelas	482	.73	1	.001	11	.02	27	.34	.....	.....	.....	.....
Dengue	17,887	27.17	.....	.....	1	.001	1,363	17.41	.....	.....	.....	.....
Mumps	7,241	11.00	.....	.....	.....	.....	1,330	16.99	1	.01	.....	.....
Cerebrospinal fever, including meningitis	160	.24	16	.02	95	.14	15	.19	.....	.....	8	.10
Purulent infection, and septicemia	103	.16	4	.01	50	.07	6	.08	1	.01	4	.05
Tuberculosis, all	2,969	4.51	1,860	2.78	393	.59	273	3.49	124	1.56	25	.31
Total, venereal	120,357	182.83	1,941	2.90	32	.05	10,699	136.70	100	1.26	8	.10
Syphilis and its results	20,192	30.67	1,283	1.92	29	.04	2,224	28.42	48	.60	6	.08
Chancroid and its results	22,332	33.92	14	.02	.....	.....	2,267	28.96	2	.03	1	.01
Gonorrhea and its results	77,833	118.23	644	.96	3	.004	6,208	79.32	50	.63	1	.01
Cancer and other malignant growths	139	.21	26	.04	52	.08	17	.22	2	.03	8	.10
Rheumatism, acute articular	5,340	8.11	18	.03	4	.01	597	7.63	1	.01	5	.06
Rheumatism, chronic articular	3,685	5.60	289	.43	1	.001	116	1.48	18	.23	.....	.....
Alcoholism and its results	17,412	26.45	140	.21	107	.16	1,360	17.38	26	.33	12	.15
Diseases of the brain and spinal cord	1,906	2.90	1,145	1.71	62	.09	320	4.09	226	2.84	7	.09
Tetanus	9	.01	.....	.....	7	.01	.....	.....	.....	.....	.....	.....

TABLE No. 68.—*Admissions to sick report, discharges, and deaths, with ratios per 1,000 of mean strength, in which all available data for the decade ending Dec. 31, 1911, are placed in comparison with the year 1912*—Continued.

Causes of admission to sick report.	The Army, 1902–1911. (Enlisted American troops only beginning 1904.)						American troops, Army 1912. (Enlisted men only.)					
Mean strength	S. G. O., 658,315 (mean annual 65,831). A. G. O., 668,388 (mean annual 66,839).						S. G. O., 78,267. A. G. O., 79,613.					
	Admissions.		Discharges.		Deaths.		Admissions.		Discharges.		Deaths.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Diseases of the heart	3,560	5.41	919	1.38	204	0.31	145	1.85	53	0.67	14	0.18
Varicocele	2,647	4.02	32	.05	.....	.....	181	2.31	3	.04	.....	.....
Adenitis nonvenereal	4,175	6.34	2	.003	.....	.....	418	5.34	.....	.....	.....	.....
Lymphangitis	312	.47	3	.004	.....	.....	33	.42	.....	.....	.....	.....
Coryza and other diseases of the nasal fossæ	12,426	18.87	57	.09	.....	.....	1,065	13.61	3	.04	.....	.....
Bronchitis, acute and chronic	29,438	44.72	49	.07	8	.01	2,731	34.89	8	.10	.....	.....
Pneumonia, all	1,900	2.89	3	.004	283	.42	212	2.71	2	.03	17	.21
Pleurisy	1,993	3.03	62	.09	23	.03	252	3.22	2	.03	.....	.....
Tonsillitis and other diseases of the pharynx	42,646	64.78	2	.003	3	.004	5,113	65.33	.....	.....	.....	.....
Gastritis	9,763	14.83	61	.09	9	.01	976	12.47	.....	.....	1	.01
Diarrhea and enteritis	56,427	85.72	89	.13	60	.09	2,380	30.41	3	.04	2	.03
Peritonitis (simple)	65	.10	4	.01	26	.04	3	.04	1	.01	2	.03
Hernia	2,972	4.52	428	.64	11	.02	299	3.82	22	.28	.....	.....
Appendicitis	2,990	4.54	54	.08	80	.12	516	6.59	.....	.....	8	.10
Diseases of the kidneys	1,184	1.80	144	.22	134	.21	99	1.26	20	.25	14	.18
Periostitis	573	.87	26	.04	.....	.....	53	.68	2	.03	.....	.....
Arthritis and synovitis	3,044	4.62	152	.23	.....	.....	247	3.16	12	.15	.....	.....
All other diseases	220,029	334.23	4,180	6.25	294	.44	16,296	208.21	327	4.11	33	.41
Total for diseases	682,639	1,036.95	12,071	18.06	3,142	4.70	52,775	674.29	970	12.18	189	2.37
Total for injuries	137,838	209.38	1,402	2.10	1,641	2.46	11,712	149.64	99	1.24	192	2.41
Grand total	820,477	1,246.33	13,473	20.16	4,783	7.16	64,487	823.94	1,069	13.43	381	4.79

TABLE No. 69.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the Army, officers and total enlisted men, for the year 1912.*

International classification	Mean strength	Officers, Army. S. G. O., 4,216—A. G. O., 4,690.								American troops, Army. S. G. O., 78,267—A. G. O., 79,613.							
	Causes of admission to sick report.	Admissions.		Retirement for disability.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
		Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
1	Typhoid fever	3	0.71			1	0.21	0.41	0.10	21	0.27			2	0.03	3.97	0.05
1a	Paratyphoid fever									4	.05					.48	.01
4	Malaria	106	25.14					2.57	.61	3,131	40.00			4	.05	66.73	.85
	Estivo-autumnal fever	20	4.74					.86	.20	702	8.97			4	.05	20.24	.26
	Malarial cachexia	3	.71					.11	.03	14	.18					1.33	.02
	Quartan malarial fever									24	.31					.67	.01
	Tertian malarial fever	79	18.74					1.47	.35	2,283	29.17					42.62	.54
	Undetermined malarial fever	4	.95					.13	.03	108	1.38					1.88	.02
5	Smallpox and varioloid									6	.08					.52	.01
5b	Vaccinia	2	.47					.005	.001	764	9.76					7.58	.10
6	Measles	3	.71					.10	.02	508	6.49	6	0.08	13	.16	29.92	.38
7	Scarlet fever									14	.18					1.09	.01
9	Diphtheria	6	1.42					.28	.07	79	1.01					4.41	.06
10	Influenza	160	37.95					2.61	.62	1,262	16.12					20.27	.26
13	Cholera nostras									3	.04					.02	.0003
14	Dysentery	20	4.74	2	0.43			1.18	.28	337	4.31	7	.09	2	.03	24.14	.31
	Bacillary	4	.95					.13	.03	35	.45	1	.01			1.74	.02
	Entamebic	10	2.37	2	.43			.56	.13	235	3.00	6	.08	2	.03	19.82	.25
	Unclassified	6	1.42					.48	.11	67	.86					2.57	.03
18	Erysipelas	4	.95					.14	.03	27	.34					1.24	.02
19b	Dengue	81	19.21					1.52	.36	1,363	17.41					23.85	.30
19d	German measles	6	1.42					.15	.03	230	2.94					5.12	.07
19e	Hemoglobinuric fever	1	.24					.003	.001							.11	.001
19g	Mumps	8	1.90					.29	.07	1,330	16.99	1	.01			60.38	77
20	Purulent infection and septicemia									6	.08	1	.01	4	.05	1.25	.02
25	Mycoses									9	.11					.69	.01
28-34	Tuberculosis, all	6	1.42	2	43	1	.21	12.59	2.99	273	3.49	124	1.56	25	.31	109.70	40
28	Tuberculosis of lungs	6	1.42	2	.43	1	.21	11.21	2.66	241	3.08	116	1.46	21	.26	102.66	31
29	Miliary tuberculosis, acute									3	.04			3	.04	.27	.003
30-34	Tuberculosis of other organs							1.39	.33	29	.37	8	.10	1	.01	6.77	.09
36	Scoliosis (rickets)									2	.03	2	.03			.36	.00
37-38	Venereal diseases, all	22	5.22					2.33	.55	10,699	136.70	100	1.26	8	.10	609.39	7.78

TABLE No. 69.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the Army, officers and total enlisted men, for the year 1912*—Continued.

International classification.	Mean strength	Officers, army. S. G. O., 4,216—A. G. O., 4,690.								American troops, army. S. G. O., 78,267—A. G. O., 79,613.							
		Admissions.		Retirement for disability.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
	Causes of admission to sick report.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
37	Syphilis	8	1.90					1.17	0.28	2,224	28.42	48	0.60	6	0.08	154.15	1.97
38a	Soft chancre	2	.47					.17	.04	2,267	28.96	2	.03	1	.01	128.54	1.64
38b	Gonococcus infection	12	2.85					.99	.23	6,208	79.32	50	.63	1	.01	326.70	4.17
39–45	Cancer and other malignant tumors	4	.95			2	0.43	.13	.03	17	.22	2	.03	8	.10	3.84	.05
46	Benign tumors	8	1.90					.32	.08	124	1.58	1	.01			4.06	.05
47–48	Rheumatism, articular, all	27	6.40	1	0.21			1.70	.40	713	9.11	19	.24	5	.06	45.99	.59
47	Acute articular rheumatism	17	4.03					.78	.19	597	7.63	1	.01	5	.06	31.49	.40
48	Chronic articular rheumatism	10	2.37	1	.21			.92	.22	116	1.48	18	.23			14.50	.19
50	Diabetes	4	.95			1	.21	.56	.13	14	.18	6	.08	1	.01	1.72	.02
51	Exophthalmic goiter	2	.47					.65	.15	14	.18	7	.09			2.39	.03
56	Alcoholism and results	19	4.51			1	.21	.27	.06	1,360	17.38	26	.33	12	.15	23.22	.30
57–58	Chronic occupational poisoning									1	.01					.03	.0004
59	Other chronic poisoning, including drug habit									32	.41	7	.09	1	.01	2.54	.03
60	Encephalitis									2	.03			2	.03	.02	.0003
61	Simple meningitis									2	.03			2	.03	.13	.002
61a	Epidemic cerebrospinal meningitis									13	.17			6	.08	.97	.01
62	Locomotor ataxia	3	.71					1.15	.27	6	.08	4	.05			2.00	.03
63	Other diseases of spinal cord									12	.15	7	.09			2.60	.03
64	Cerebral hemorrhage, apoplexy	1	.24					.02	.01	5	.06	2	.03	3	.04	1.22	.02
66	Paralysis without specified cause	3	.71					.53	.13	25	.32	3	.04			3.10	.04
67–68	Mental alienation	7	1.66	2	.43			.72	.17	270	3.45	210	2.64	2	.03	60.45	.77
69	Epilepsy	3	.71					1.00	.24	91	1.16	32	.40			8.73	.11
73	Neuralgia and neuritis	46	10.91					1.70	.40	440	5.62	21	.26			21.99	.28
75a	Follicular conjunctivitis									9	.11					.20	.003
75b	Trachoma	2	.47					.12	.03	25	.32	3	.04			1.31	.02
77	Pericarditis									8	.10					.86	.01
78	Acute endocarditis									6	.08	1	.01			.65	.01
79	Organic heart disease	10	2.37	4	.85	2	.43	.30	.07	126	1.61	51	.64	14	.18	15.41	.20
80	Angina pectoris									18	.23	1	.01	3	.04	.97	.01

81	Diseases of the arteries, atheroma, aneurism, etc.	3	.71	1	.21			.14	.03	18	.23	1	.01	5	.06	2.11	.03
82	Embolism and thrombosis	1	.24			1	.21	.01	.002	1	.01			1	.01	.01	.0001
83b	Hemorrhoids	41	9.72					1.53	.36	481	6.15	1	.01			15.11	.19
83 f	Varicose veins	6	1.42					.35	.08	59	.77					4.18	.05
83e	Varicocele	1	.24					.11	.03	181	2.31	3	.04			11.20	.14
84	Diseases of the lymphatic system	7	1.66					.56	.13	454	5.80					24.25	.31
86	Diseases of the nasal fossae	126	29.89					1.44	.34	1,065	13.61	3	.04			14.97	.19
87	Diseases of the larynx	19	4.51					.20	.05	241	3.08					3.88	.05
88	Diseases of the thyroid body	1	.24					.13	.03	12	.15	2	.03	1	.01	1.15	.01
89-90	Bronchitis	181	42.93					2.80	.66	2,731	34.89	8	.10			58.98	.75
91	Broncho-pneumonia	1	.24					.07	.02	34	.43			5	.06	3.92	.05
92	Pneumonia	8	1.90			2	.43	.94	.22	178	2.27	2	.03	12	.15	14.09	.18
93	Pleurisy	5	1.19					.22	.05	252	3.22	2	.03			18.21	.23
94	Pulmonary congestion and pulmonary apoplexy	1	.24					.003	.001	23	.29			2	.03	.28	.004
96	Asthma	11	2.61					.78	.19	67	.86	6	.08			4.98	.06
98a	Hemoptysis									8	.10					.19	.002
98b	Hay fever	3	.71					.07	.02	4	.05					.17	.002
99a	Diseases of the teeth and gums	46	10.91					1.16	.27	565	7.22					10.43	.13
99b	Other diseases of the mouth and annexa	4	.95					.07	.02	61	.78	1	.01			2.24	.03
100	Diseases of the pharynx	161	38.19					2.10	.50	5,1 3	65.33					74.70	.95
102	Ulcer of stomach	1	.24					.02	.004	9	.11	3	.04	1	.01	1.78	.02
103	Other diseases of stomach (cancer excepted)	88	20.87					1.70	.40	1,040	13.29	1	.01	1	.01	19.57	.25
105	Diarrhea and enteritis	151	35.82					3.85	.91	2,380	30.41	3	.04	2	.03	35.00	.45
107	Intestinal parasites	6	1.42					.05	.01	179	2.29					3.44	.04
108	Appendicitis	54	12.81			2	.43	4.90	1.16	516	6.59			8	.10	40.64	.52
109	Hernia	23	5.46	1	.21			2.33	.55	299	3.82	22	.28			32.45	.41
110a	Diseases of the anus and fæcal fistula	5	1.19					.39	.09	69	.88	2	.03			5.29	.07
110b	Other diseases of the intestines	46	10.91			1	.21	1.61	.38	2,053	26.23	2	.03	1	.01	27.60	.35
113	Cirrhosis of liver							.03	.01	5	.06			2	.03	.48	.01
114	Biliary calculi	2	.47					.04	.01	19	.24			1	.01	1.43	.02
115	Other diseases of liver and gall bladder	18	4.27					1.07	.25	274	3.50			4	.05	15.68	.20
117	Simple peritonitis									3	.04	1	.01	2	.03	.28	.004
119	Acute nephritis	1	.24					.05	.01	28	.36			6	.08	1.60	.02
120	Bright's disease	11	2.61	2	.43	3	.64	3.10	.74	47	.60	16	.20	8	.10	8.01	.10
122	Other diseases of the kidney and annexa	3	.71					.19	.04	24	.31	4	.05			1.79	.02
124	Diseases of the bladder	9	2.13					.46	.11	210	2.68	30	.38			12.61	.16
125	Diseases of the urethra, urinary abscess, etc.	1	.24					.02	.004	105	1.34					1.93	.03
126	Diseases of the prostate	1	.24					.31	.07	5	.06					.36	.005
127	Diseases of the male genital organs (non-venereal)	5	1.19					.25	.06	451	5.76	2	.03			15.67	.20
143	Furuncle and carbuncle	64	15.18					1.29	.31	1,498	19.14					28.79	.37
144	Acute abscess and cellulitis	32	7.59					.76	.18	1,054	13.47					27.89	.36
146	Diseases of the bones	18	4.27					.95	.22	157	2.01	9	.11			13.00	.17
147	Diseases of the joints	18	4.27					1.23	.29	259	3.31	15	.19			18.74	.24

TABLE NO. 69.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the Army, officers and total enlisted men, for the year 1912*—Continued.

International classification.	Causes of admission to sick report.	Officers, army.								American troops, army.							
	Mean strength	S. G. O., 4,216—A. G. O., 4,690.								S. G. O., 78,267—A. G. O., 79,613.							
		Admissions.		Retirement for disability.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
		Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
150	Congenital malformations	6	1.42	.....	.....	.....	.....	0.23	0.05	287	3.67	1	0.01	.....	.....	9.25	0.12
189Aa	Febricula, simple continued, and other fevers of undetermined causation	5	1.19	.....	.....	.....	.....	.12	.03	319	4.08	.....	.....	.....	.....	5.51	.07
189Ba	Under observation, undiagnosed and unknown	6	1.42	.....	.....	.....	.....	.39	.09	150	1.92	1	.01	2	0.03	9.49	.12
189Bb	Malingering	.....	.....	.....	.....	.....	.....	.....	.....	34	.43	.....	.....	.....	.....	1.72	.02
	AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[1]																
155–163	Suicides, all	.....	.....	.....	.....	2	0.43	.....	.....	20	.26	.....	.....	54	.68	.....	.....
164	Poisoning by food	13	3.08	.....	.....	.....	.....	.....	.....	293	3.74	.....	.....	2	.03	.....	.....
165a	Venemous bites and stings	.....	.....	.....	.....	.....	.....	.....	.....	85	1.09	.....	.....	.....	.....	.....	.....
165b	Other poisoning (deleterious gases excepted)	1	.24	.....	.....	.....	.....	.....	.....	29	.37	.....	.....	7	.09	.....	.....
166	Conflagration	.....	.....	.....	.....	.....	.....	.....	.....	2	.03	.....	.....	.....	.....	.....	.....
167	Burns (conflagrations excepted)	2	.47	.....	.....	.....	.....	.....	.....	196	2.50	.....	.....	.....	.....	.....	.....
168	Absorption of deleterious gases	.....	.....	.....	.....	.....	.....	.....	.....	3	.04	.....	.....	2	.03	.....	.....
168a	Suffocation, strangulation	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.01	.....	.....
169	Drowning, accidental	.....	.....	.....	.....	1	.21	.....	.....	.....	.....	.....	.....	43	.54	.....	.....
170	Traumatism by firearms (other than specified)	3	.71	.....	.....	.....	.....	.....	.....	158	2.02	15	.19	11	.14	.....	.....
170a	Shot by sentry or guard	.....	.....	.....	.....	.....	.....	.....	.....	8	.10	.....	.....	4	.05	.....	.....
171	Traumatism by cutting or piercing instruments	9	2.13	.....	.....	.....	.....	.....	.....	941	12.02	8	.10	2	.03	.....	.....
172	Traumatism by fall	168	39.85	1	0.21	.....	.....	.....	.....	3,775	48.23	24	.30	14	.18	.....	.....
173	Traumatism in mines and quarries	1	.24	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
174	Traumatism by machines	3	.71	.....	.....	.....	.....	.....	.....	93	1.19	3	.04	1	.01	.....	.....
175	Traumatism by other crushing	2	.47	.....	.....	2	.43	.....	.....	156	1.99	8	.10	26	.33	.....	.....
176	Injuries by animals	87	20.63	.....	.....	1	.21	.....	.....	1,148	14.67	6	.08	.....	.....	.....	.....
178	Effects of excessive cold	1	.24	.....	.....	.....	.....	.....	.....	45	.57	2	.03	.....	.....	.....	.....

179	**Effects of heat**	11	2.61							173	2.21			1	.01		
180	Effects of lightning									5	.06			2	.03		
181	Effects of electricity	1	.24							1	.01						
182-4	Homicides, all					1	.21			8	.10			20	.25		
185	Fractures, causes not specified									8	.10			1	.01		
186	Other external violence	127	30.12							4,563	58.30	32	.40	1	.01		
	Killed or wounded in action	1	.24							2	.03	1	.01				
	By bullet	1	.24							1	.01	1	.01				
	By bolo, kris, etc									1	.01						
155-186	Total external causes	430	101.99	1	.21	7	1.49	18.99	4.50	11,712	149.64	99	1.24	192	2.41	365.23	4.67
	DISEASES AND INJURIES GROUPED.																
	General diseases:																
1-19	Epidemic diseases	428	101.52	2	.43	1	.21	9.46	2.24	9,551	122.03	14	.18	21	.26	257.14	3.29
20-59	Other general diseases	93	22.06	3	.64	5	1.07	18.93	4.49	13,295	169.86	301	3.78	68	.85	808.47	10.33
	Diseases of the nervous system and organs of special sense:																
60-74	Of the nervous system	112	26.57	4	.85			10.40	2.47	1,137	14.53	299	3.76	15	.19	115.91	1.48
75	Of the eye and its adnexa	62	14.70	1	.21			1.57	.37	713	9.11	15	.19			24.91	.32
76	Of the ear and its adnexa	23	5.46	3	.64			1.63	.39	448	5.72	31	.39	1	.01	20.65	.26
77-85	Diseases of the circulatory system	73	17.31	5	1.07	3	.64	3.45	.82	1,487	19.00	67	.84	23	.29	82.31	1.05
86-98	Diseases of the respiratory system	357	84.68			2	.43	6.72	1.59	4,648	59.38	24	.30	21	.26	121.83	15.57
99-118	Diseases of the digestive system	607	143.98	1	.21	3	.64	19.34	4.59	12,595	160.92	36	.45	23	.29	271.51	3.47
119-127	Diseases of the genito-urinary system	42	9.96	2	.43	3	.64	4.69	1.11	910	11.63	53	.67	14	.18	43.28	.55
142-145	Diseases of the skin and cellular tissue	149	35.34					4.07	.96	5,055	64.59	11	.14	1	.01	126.08	1.61
146-149	Diseases of the organs of locomotion	117	27.75					4.94	1.17	2,068	26.42	117	1.47			91.55	1.17
150	Malformations, etc	6	1.42					.23	.05	287	3.67	1	.01			9.25	.12
189	Ill-defined diseases	17	4.03					.66	.16	581	7.42	1	.01	2	.03	17.67	.23
	Total for disease	2,086	494.78	21	4.48	17	3.62	86.09	20.42	52,775	674.29	970	12.18	189	2.37	1,990.57	25.43
155-186	External causes	430	101.99	1	.21	7	1.49	18.99	4.50	11,712	149.64	99	1.24	192	2.41	365.23	4.67
	Total for disease and external causes	2,516	596.78	22	4.69	24	5.12	105.08	24.92	64,487	823.94	1,069	13.43	381	4.79	2,355.80	30.10

[1] Noneffectiveness for individual external causes not tabulated.

TABLE No 70.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the enlisted men of the Army for the year 1912.*

International classification.	Causes of admission to sick report.	Total.								White.								Colored.							
	Mean strength	S. G., 78,267—A. G., 79,613.								S. G., 74,366—A. G., 75,712.								S. G., 3,901—A. G., 3,901.							
		Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
		Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
1	Typhoid fever	21	0.27	.....	.....	2	0.03	3.97	0.05	21	0.28	.....	.....	2	0.03	3.97	0.05	.....	.....	.....	.....	.....	.....	.....	.....
1a	Paratyphoid fever	4	.05	.....	.....	.....	.....	.48	.01	4	.05	.....	.....	.....	.....	.48	.01	.....	.....	.....	.....	.....	.....	.....	.....
4	Malaria	3,131	40.00	.....	.....	4	.05	66.73	.85	3,057	41.11	.....	.....	4	.05	65.02	.87	74	18.97	.....	.....	.....	.....	1.71	0.44
	Estivo-autumnal fever	702	8.97	.....	.....	4	.05	20.24	.26	667	8.97	.....	.....	4	.05	19.30	.26	35	8.97	.....	.....	.....	.....	.93	.24
	Malarial cachexia	14	.18	.....	.....	.....	.....	1.33	.02	14	.19	.....	.....	.....	.....	1.33	.02	.....	.....	.....	.....	.....	.....	.....	.....
	Quartan malarial fever	24	.31	.....	.....	.....	.....	.67	.01	23	.31	.....	.....	.....	.....	.61	.01	1	.26	.....	.....	.....	.....	.02	.01
	Tertian malarial fever	2,283	29.17	.....	.....	.....	.....	42.62	.54	2,266	30.47	.....	.....	.....	.....	42.24	.57	17	4.36	.....	.....	.....	.....	.37	.10
	Undetermined malarial fever	108	1.38	.....	.....	.....	.....	1.88	.02	87	1.17	.....	.....	.....	.....	1.50	.02	21	5.38	.....	.....	.....	.....	.38	.10
5	Smallpox and varioloid	6	.08	.....	.....	.....	.....	.52	.01	6	.08	.....	.....	.....	.....	.52	.01	.....	.....	.....	.....	.....	.....	.....	.....
5b	Vaccinia	764	9.76	.....	.....	.....	.....	7.58	.10	758	10.19	.....	.....	.....	.....	7.48	.10	6	1.54	.....	.....	.....	.....	.10	.03
6	Measles	508	6.49	6	0.08	13	.16	29.92	.38	490	6.59	6	0.08	13	.17	28.79	.39	18	4.61	.....	.....	.....	.....	1.13	.29
7	Scarlet fever	14	.18	.....	.....	.....	.....	1.09	.01	14	.19	.....	.....	.....	.....	1.09	.01	.....	.....	.....	.....	.....	.....	.....	.....
9	Diphtheria	79	1.01	.....	.....	.....	.....	4.41	.06	79	1.06	.....	.....	.....	.....	4.41	.06	.....	.....	.....	.....	.....	.....	.....	.....
10	Influenza	1,262	16.12	.....	.....	.....	.....	20.27	.26	1,229	16.53	.....	.....	.....	.....	19.69	.26	33	8.46	.....	.....	.....	.....	.58	.15
13	Cholera nostras	3	.04	.....	.....	.....	.....	.02	.0003	3	.04	.....	.....	.....	.....	.02	.0003	.....	.....	.....	.....	.....	.....	.....	.....
14	Dysentery	337	4.31	7	.09	2	.03	24.14	.31	322	4.33	6	.08	2	.03	22.73	.31	15	3.85	1	0.26	.....	.....	1.41	.36
	Bacillary	35	.45	1	.01	.....	.....	1.74	.02	32	.43	1	.01	.....	.....	1.56	.02	3	.77	.....	.....	.....	.....	.18	.05
	Entamebic	235	3.00	6	.08	2	.03	19.82	.25	226	3.01	5	.07	2	.03	18.77	.25	9	2.31	1	.26	.....	.....	1.05	.27
	Unclassified	67	.86	.....	.....	.....	.....	2.57	.03	64	.86	.....	.....	.....	.....	2.39	.03	3	.77	.....	.....	.....	.....	.18	.05
18	Erysipelas	27	.34	.....	.....	.....	.....	1.24	.02	26	.35	.....	.....	.....	.....	1.15	.02	1	.26	.....	.....	.....	.....	.09	.02
19b	Dengue	1,363	17.41	.....	.....	.....	.....	23.85	.30	1,136	15.28	.....	.....	.....	.....	18.90	.25	227	58.19	.....	.....	.....	.....	4.95	1.27
19d	German measles	230	2.94	.....	.....	.....	.....	5.12	.07	230	3.09	.....	.....	.....	.....	5.08	.07	.....	.....	.....	.....	.....	.....	.03	.01
19e	Hemoglobinuric fever	.....	.....	.....	.....	.....	.....	.11	.001	.....	.....	.....	.....	.....	.....	.11	.002	.....	.....	.....	.....	.....	.....	.....	.....
19g	Mumps	1,330	16.99	1	.01	.....	.....	60.38	.77	1,302	17.51	1	.01	.....	.....	58.87	.79	28	7.18	.....	.....	.....	.....	1.51	.39
20	Purulent infection and septicemia	6	.08	1	.01	4	.05	1.25	.02	6	.08	1	.01	4	.05	1.25	.02	.....	.....	.....	.....	.....	.....	.....	.....
25	Mycosis	9	.11	.....	.....	.....	.....	.69	.01	9	.12	.....	.....	.....	.....	.69	.01	.....	.....	.....	.....	.....	.....	.....	.....
28–34	Tuberculosis, all	273	3.49	124	1.56	25	.31	109.70	1.40	252	3.39	119	1.57	19	.25	101.86	1.37	21	5.38	5	1.28	6	1.54	7.84	2.01
28	Tuberculosis of lungs	241	3.08	116	1.46	21	.26	102.66	1.31	225	3.02	111	1.47	17	.22	95.48	1.28	16	4.10	5	1.28	4	1.03	7.17	1.84

	organs	29	.37	8	.10	1	.01	6.77	.09	26	.35	8	.11	1	.01	6.35	.09	3	.77					.42	.11
36	Scoliosis (rickets)	2	.03	2	.03			.36	.005	2	.03	2	.03			.36	.005								
37–38	Venereal diseases, all	10,699	136.70	100	1.26	8	.10	609.39	7.78	9,726	130.79	97	1.28	7	.09	566.05	7.61	973	249.42	3	.77	1	.26	43.34	11.11
37	Syphilis	2,224	28.42	48	.60	6	.08	154.15	1.97	2,142	28.80	46	.61	5	.07	146.07	1.96	82	21.02	2	.51	1	.26	8.08	2.07
38a	Soft chancre	2,267	28.96	2	.03	1	.01	128.54	1.64	2,025	27.23	2	.03	1	.01	118.62	1.60	242	62.03					9.91	2.54
38b	Gonococcus infection	6,208	79.32	50	.63	1	.01	326.70	4.17	5,559	74.75	49	.65	1	.01	301.36	4.05	649	166.37	1	.26			25.34	6.50
39–45	Cancer and other malignant tumors	17	.22	2	.03	8	.10	3.84	.05	17	.23	2	.03	8	.11	3.84	.05								
46	Benign tumors	124	1.58	1	.01			4.06	.05	121	1.63	1	.01			4.01	.05	3	.77					.06	.01
47–48	Rheumatism, articular, all	713	9.11	19	.24	5	.06	45.99	.59	668	8.98	18	.24	4	.05	44.30	.60	45	11.54	1	.26	1	.26	1.69	.43
47	Acute articular rheumatism	597	7.63	1	.01	5	.06	31.49	.40	564	7.58	1	.01	4	.05	30.14	.41	33	8.46			1	.26	1.35	.35
48	Chronic articular rheumatism	116	1.48	18	.23			14.50	.19	104	1.40	17	.22			14.16	.19	12	3.08	1	.26			.34	.09
50	Diabetes	14	.18	6	.08	1	.01	1.72	.02	14	.19	6	.08	1	.01	1.72	.02								
51	Exophthalmic goiter	14	.18	7	.09			2.39	.03	14	.19	7	.09			2.39	.03								
56	Alcoholism and results	1,360	17.38	26	.33	12	.15	23.22	.30	1,324	17.80	25	.33	12	.16	21.96	.30	36	9.23	1	.26			1.26	.32
57–58	Chronic occupational poisoning	1	.01					.03	.0004	1	.01					.03	.0004								
59	Other chronic poisoning, including drug habit	32	.41	7	.09	1	.01	2.54	.03	30	.40	6	.08	1	.01	2.10	.03	2	.51	1	.26			.44	.11
60	Encephalitis	2	.03			2	.03	.02	.0003	2	.03			2	.03	.02	.0003								
61	Simple meningitis	2	.03			2	.03	.13	.002	2	.03			2	.03	.13	.002								
61a	Epidemic cerebrospinal meningitis	13	.17			6	.08	.97	.01	13	.17			6	.08	.97	.01								
62	Locomotor ataxia	6	.08	4	.05			2.00	.03	6	.08	4	.05			2.00	.03								
63	Other diseases of spinal cord	12	.15	7	.09			2.60	.03	12	.16	7	.09			2.60	.03								
64	Cerebral hemorrhage, apoplexy	5	.06	2	.03	3	.04	1.22	.02	5	.07	2	.03	3	.04	1.22	.02								
66	Paralysis without specified cause	25	.32	3	.04			3.10	.04	24	.32	3	.04			3.09	.04	1	.26					.01	.003
67–68	Mental alienation	270	3.45	210	2.64	2	.03	60.45	.77	258	3.47	203	2.68	2	.03	58.07	.78	12	3.08	7	1.79			2.38	.61
69	Epilepsy	91	1.16	32	.40			8.73	.11	87	1.17	31	.41			8.34	.11	4	1.03	1	.26			.39	.10
73	Neuralgia and neuritis	440	5.62	21	.26			21.99	.28	400	5.38	20	.26			19.92	.27	40	10.25	1	.26			2.07	.53
75a	Follicular conjunctivitis	9	.11					.20	.003	9	.12					.20	.003								
75b	Trachoma	25	.32	3	.04			1.31	.02	25	.34	3	.04			1.31	.02								
77	Pericarditis	8	.10					.86	.01	8	.11					.86	.01								
78	Acute endocarditis	6	.08	1	.01			.65	.01	6	.08	1	.01			.65	.01								
79	Organic heart disease	126	1.61	51	.64	14	.18	15.41	.20	123	1.65	50	.66	12	.16	14.70	.20	3	.77	1	.26	2	.51	.71	.18
80	Angina pectoris	18	.23	1	.01	3	.04	.97	.01	17	.23	1	.01	3	.04	.96	.01	1	.26					.005	.001
81	Diseases of the arteries, atheroma, aneurism, etc	18	.23	1	.01	5	.06	2.11	.03	16	.22	1	.01	3	.04	2.08	.03	2	.51			2	.51	.04	.01
82	Embolism and thrombosis	1	.01			1	.01	.01	.0001	1	.01			1	.01	.01	.0001								
83b	Hemorrhoids	481	6.15	1	.01			15.11	.19	435	5.85	1	.01			13.94	.19	46	11.79					1.17	.30
83d	Varicose veins	59	.75					4.18	.05	58	.78					4.12	.06	1	.26					.05	.01
83e	Varicocele	181	2.31	3	.04			11.20	.14	179	2.41	3	.04			11.13	.15	2	.51					.07	.02
84	Diseases of the lymphatic system	454	5.80					24.25	.31	439	5.90					23.81	.32	15	3.85					.45	.11
86	Diseases of the nasal fossæ	1,065	13.61	3	.04			14.97	.19	1,030	13.85	3	.04			14.66	.20	35	8.97					.31	.08
87	Diseases of the larynx	241	3.08					3.88	.05	232	3.12					3.78	.05	9	2.31					.10	.02

TABLE No 70.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for enlisted men of the Army for the year 1912*—Continued.

International classification.	Causes of admission to sick report.	Total.								White.								Colored.							
	Mean strength	S. G., 78,267—A. G., 79,613.								S. G., 74,366—A. G., 75,712.								S. G., 3,901—A. G., 3,901.							
		Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
		Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
88	Diseases of the thyroid body	12	0.15	2	0.03	1	0.01	1.15	0.01	12	0.16	2	0.03	1	0.01	1.15	0.02								
89-90	Bronchitis	2,731	34.89	8	.10			58.98	.75	2,573	34.60	8	.11			56.02	.75	158	40.50					2.96	0 76
91	Broncho-pneumonia	34	.43			5	.06	3.92	.05	33	.44			5	.07	3.73	.05	1	.26					.19	.05
92	Pneumonia	178	2.27	2	.03	12	.15	14.09	.18	166	2.23	2	.03	11	.15	13.40	.18	12	3.08			1	0.26	.68	.18
93	Pleurisy	252	3.22	2	.03			18.21	.23	233	3.13	2	.03			17.02	.23	19	4.87					1.20	.31
94	Pulmonary congestion and pulmonary apoplexy	23	.29			2	.03	.28	.004	23	.31			2	.03	.28	.004								
96	Asthma	67	.86	6	.08			4.98	.06	63	.85	6	.08			4.92	.07	4	1.03					.06	.02
98a	Hemoptysis	8	.10					.19	.002	8	.11					.19	.003								
98b	Hay fever	4	.05					.17	.002	4	.05					.17	.002								
99a	Diseases of the teeth and gums	565	7.22					10.43	.13	543	7.30					9.97	.13	22	5.64					.46	.12
99b	Other diseases of the mouth and annexa	61	.78	1	.01			2.24	.03	59	.79	1	.01			2.22	.03	2	.51					.02	.01
100	Diseases of the pharynx	5,113	65.33					74.70	.95	4,958	66.67					72.46	.97	155	39.73					2.25	.58
102	Ulcer of stomach	9	.11	3	.04	1	.01	1.78	.02	8	.11	3	.04	1	.01	1.75	.02	1	.26					.04	.01
103	Other diseases of stomach (cancer excepted)	1,040	13.29	1	.01	1	.01	19.57	.25	998	13.42	1	.01	1	.01	19.11	.26	42	10.77					.45	.12
105	Diarrhea and enteritis	2,380	30.41	3	.04	2	.03	35.00	.45	2,208	29.69	3	.04	2	.03	32.79	.44	172	44.09					2.21	.57
107	Intestinal parasites	179	2.29					3.44	.04	175	2.35					3.32	.04	4	1.03					.12	.03
108	Appendicitis	516	6.59			8	.10	40.64	.52	496	6.67			8	.11	39.41	.53	20	5.13					1.23	.32
109	Hernia	299	3.82	22	.28			32.45	.41	280	3.76	22	.29			30.12	.41	19	4.87					2.33	.60
110a	Diseases of the anus and fecal fistula	69	.88	2	.03			5.29	.07	67	.90	2	.03			5.22	.07	2	.51					.07	.02
110b	Other diseases of the intestines	2,053	26.23	2	.03	1	.01	27.60	.35	1,834	24.66	2	.03	1	.01	25.06	.34	219	56.14					2.54	.65
113	Cirrhosis of liver	5	.06			2	.03	.48	.01	5	.07			2	.03	.48	.01								
114	Biliary calculi	19	.24			1	.01	1.43	.02	19	.26			1	.01	1.43	.02								
115	Other diseases of liver and gall bladder	274	3.50			4	.05	15.68	.20	253	3.40			3	.04	14.39	.19	21	5.38			1	.26	1.29	.33

117	Simple peritonitis	3	.04	1	.01	2	.03	.28	.004	3	.04	1	.01	2	.03	.28	.004												
119	Acute nephritis	28	.36			6	.08	1.60	.02	27	.36			6	.08	1.55	.02	1	.26							.05	.01
120	Bright's disease	47	.60	16	.20	8	.10	8.01	.10	43	.58	15	.20	8	.11	7.35	.10	4	1.03	1	.26					.66	.17
122	Other diseases of the kidney and annexa	24	.31	4	.05			1.79	.02	24	.32	4	.05			1.79	.02												
124	Diseases of the bladder	210	2.68	30	.38			12.61	.16	199	2.68	29	.38			12.21	.16	11	2.82	1	.26					.40	.10
125	Diseases of the urethra, urinary abscess, etc	107	1.34					1.93	.03	99	1.33					1.85	.02	6	1.54							.08	.02
126	Diseases of the prostate	5	.06					.36	.005	5	.07					.36	.005												
127	Diseases of the male genital organs (nonvenereal)	451	5.76	2	.03			15.67	.20	433	5.82	2	.03			15.15	.20	18	4.61							.53	.14
143	Furuncle and carbuncle	1,498	19.14					28.79	.37	1,427	19.19					27.61	.37	71	18.20							1.18	.30
144	Acute abscess and cellulitis	1,054	13.47					27.89	.36	997	13.41					26.54	.36	57	14.61							1.35	.35
146	Diseases of the bones	157	2.01	9	.11			13.00	.17	142	1.91	9	.12			12.04	.16	15	3.87							.96	.25
147	Diseases of the joints	259	3.31	15	.19			18.74	.24	242	3.25	15	.20			17.42	.23	17	4.36							1.32	.34
150	Congenital malformations	287	3.67	1	.01			9.25	.12	277	3.72	1	.01			8.94	.12	10	2.56							.30	.08
189Aa	Febricula, simple continued, and other fevers of undetermined causation	319	4.08					5.51	.07	311	4.18					5.43	.07	8	2.05							.07	.02
189Ba	Under observation, undiagnosed, and unknown	150	1.92	1	.01	2	.03	9.49	.12	145	1.95	1	.01	2	.03	8.98	.12	5	1.28							.51	.13
189Bb	Malingering	34	.43					1.72	.02	32	.43					1.59	.02	2	.51							.13	.03
	AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[1]																												
155–163	Suicides, all	20	.26			54	.68			19	.26			51	.67			1	.26			3	.77						
164	Poisoning by food	293	3.74			2	.03			293	3.94			2	.03														
165a	Venomous bites and stings	85	1.09							79	1.06							6	1.54										
165b	Other poisoning (deleterious gases excepted)	29	.37			7	.09			27	.36			7	.09			2	.51										
166	Conflagration	2	.03							2	.03																		
167	Burns (conflagrations excepted)	196	2.50							188	2.53							8	2.05										
168	Absorption of deleterious gases	3	.04			2	.03			3	.04			2	.03														
168a	Suffocation, strangulation					1	.01							1	.01														
169	Drowning, accidental					43	.54							41	.54							2	.51						
170	Traumatism by firearms (other than specified)	158	2.02	15	.19	11	.14			155	2.08	15	.20	10	.13			3	.77			1	.26						
170a	Shot by sentry or guard	8	.10			4	.05			7	.09			2	.03			1	.26			2	.51						
171	Traumatism by cutting or piercing instruments	941	12.02	8	.10	2	.03			858	11.54	8	.11	2	.03			83	21.28										
172	Traumatism by fall	3,775	48.23	24	.30	14	.18			3,530	47.47	24	.32	14	.18			245	62.80										
174	Traumatism by machines	93	1.19	3	.04	1	.01			91	1.22	3	.04	1	.01			2	.51										
175	Traumatism by other crushing	156	1.99	8	.10	26	.33			149	2.00	7	.09	25	.33			7	1.79	1	.26	1	1.26						
176	Injuries by animals	1,148	14.67	6	.08					1,039	14.37	5	.07					79	20.25	1	.26								
178	Effects of excessive cold	45	.57	2	.03					37	.50	2	.03					8	2.05										
179	Effects of heat	173	2.21			1	.01			170	2.29			1	.01			3	.77										
180	Effects of lightning	5	.06			2	.03			5	.07			2	.03														

[1] Noneffectiveness for individual external causes not tabulated.

TABLE No. 70.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for enlisted men of the Army for the year 1912*—Continued.

International classification.	Causes of admission to sick report.	Total.								White.								Colored.							
	Mean strength	S. G., 78, 267—A. G., 79,613.								S. G., 74,366—A. G., 75,712.								S. G., 3,901—A. G., 3,901.							
		Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
		Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
	AFFECTIONS PRODUCED BY EXTERNAL CAUSES—con.																								
181	Effects of electricity	1	0.01							1	0.01														
182–4	Homicides, all	8	.10			20	0.25			6	.08			15	0.20			2	0.51			5	1.28		
185	Fractures, causes not specified	8	.10			1	.01			8	.11			1	.01										
186	Other external violence	4,563	58.30	32	0.40	1	.01			4,300	57.82	32	0.42	1	.01			263	67.42						
	Killed or wounded in action	2	.03	1	.01					2	.03	1	.01												
	By bullet	1	.01	1	.01					1	.01	1	.01												
	By bolo, kris, etc	1	.01							1	.01														
155–186	Total external causes	11,712	149.64	99	1.24	192	2.41	365.23	4.67	10,999	147.90	97	1.28	178	2.35	344.36	4.63	713	182.77	2	0.51	14	3.59	20.87	5.35
	DISEASES AND INJURIES GROUPED.																								
	General diseases	22,846	291.90	315	3.96	89	1.12	1,065.61	13.61	21,350	287.10	303	4.00	81	1.07	999.12	13.44	1,496	383.49	12	3.08	8	2.05	66.49	17.04
1–19	Epidemic diseases	9,551	122.03	14	.18	21	.26	257.14	3.29	9,135	122.84	13	.17	21	.28	245.27	3.30	416	106.64	1	.26			11.87	3.04
20–59	Other general diseases	13,295	169.86	301	3.78	68	.85	808.47	10.33	12,215	164.26	290	3.83	60	.79	753.85	10.14	1,080	276.85	11	2.82	8	2.05	54.62	14.00
	Diseases of the nervous system and organs of special sense	2,298	29.36	345	4.33	16	.20	161.47	2.06	2,174	29.23	336	4.44	16	.21	154.61	2.08	124	31.79	9	2.31			6.86	1.76
60–74	Of the nervous system	1,137	14.53	299	3.76	15	.19	115.91	1.48	1,076	14.47	290	3.83	15	.20	110.90	1.49	61	15.64	9	2.31			5.01	1.29
75	Of the eye and its annexa	713	9.11	15	.19			24.91	.32	665	8.94	15	.20			23.44	.32	48	12.30					1.47	.38
76	Of the ear and its annexa	448	5.72	31	.39	1	.01	20.65	.26	433	5.82	31	.41	1	.01	20.27	.27	15	3.85					.38	.10

77–85	Diseases of the circulatory system	1,487	19.00	67	.84	23	.29	82.31	1.05	1,408	18.93	66	.87	19	.25	79.59	1.07	79	20.25	1	.26	4	1.03	2.72	.70
86–98	Diseases of the respiratory system	4,648	59.38	24	.30	21	.26	121.83	15.57	4,410	59.30	24	.32	20	.26	116.33	1.56	238	61.01	....	.....	1	.26	5.50	1.41
99–118	Diseases of the digestive system	12,595	160.92	36	.45	23	.29	271.51	3.47	11,916	160.23	36	.48	22	.29	258.50	3.48	679	174.06	....	.....	1	.26	13.01	3.34
119–127	Diseases of the genito-urinary system	910	11.63	53	.67	14	.18	43.28	.55	868	11.67	51	.67	14	.18	41.52	.56	42	10.77	2	.51	....	....	1.76	.45
142–145	Diseases of the skin and cellular tissue	5,055	64.59	11	.14	1	.01	126.08	1.61	4,801	64.56	11	.15	1	.01	120.37	1.62	254	65.11	....	.....	....	....	5.71	1.46
146a–149	Diseases of the organs of locomotion	2,068	26.42	117	1.47	....	....	91.55	1.17	1,901	25.56	116	1.53	....	....	85.23	1.15	167	42.81	1	.26	....	....	6.31	1.62
150	Malformations, etc	287	3.67	1	.01	....	....	9.25	.12	277	3.72	1	.01	....	....	8.94	.12	10	2.56	....	.....	....	....	.30	.08
189	Ill-defined diseases	581	7.42	1	.01	2	.03	17.67	.23	564	7.58	1	.01	2	.03	16.94	.23	17	4.36	....	.....	....	....	.73	.19
	Total for disease	52,775	674.29	970	12.18	189	2.37	1,990.57	25.43	49,669	667.90	945	12.48	175	2.31	1,881.16	25.30	3,106	796.21	25	6.41	14	3.59	109.41	28.05
155–186	External causes	11,712	149.64	99	1.24	192	2.41	365.23	4.67	10,999	147.90	97	1.28	178	2.35	344.36	4.63	713	182.77	2	.51	14	3.59	20.87	5.35
	Total for disease and external causes	64,487	823.94	1,069	13.43	381	4.79	2,355.80	30.10	60,668	815.80	1,042	13.76	353	4.66	2,225.51	29.93	3,819	978.98	27	6.92	28	7.18	130.28	33.40

TABLE No. 71.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with States (continental) excluding*

International classification.	Causes of admission to sick report.	United States, continental, excluding Alaska, total. S. G. O., 58,374.—A. G. O., 59,720. Admissions. Number.	Admissions. Ratio.	Discharges. Number.[1]	Discharges. Number.[2]	Discharges. Ratio.	Deaths. Number.[1]	Deaths. Number.[2]	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
1	Typhoid fever	15	0.26	.....	...	.....	2	20	0.03	2.76	0.05
1a	Paratyphoid fever	3	.05	.....	...	.....	...	...	.....	.40	.01
4	Malaria	830	14.22	.....	...	.....	...	...	.....	17.30	.30
	Estivo-autumnal fever	56	.96	.....	...	.....	...	...	.....	1.55	.03
	Malarial cachexia	8	.14	.....	...	.....	...	...	.....	.83	.01
	Quartan malarial fever	7	.12	.....	...	.....	...	...	.....	.19	.003
	Tertian malarial fever	718	12.30	.....	...	.....	...	...	.....	14.09	.24
	Undetermined malarial fever	41	.70	.....	...	.....	...	...	.....	.64	.01
5	Smallpox and varioloid	6	.10	.....	...	.....	...	...	.....	.52	.01
5b	Vaccinia	750	12.85	.....	...	.....	...	...	.....	7.38	.13
6	Measles	426	7.30	6	6	0.10	12	12	.20	25.11	.43
7	Scarlet fever	14	.24	.....	...	.....	...	...	.....	1.09	.02
9	Diphtheria	76	1.30	.....	...	.....	...	...	.....	4.07	.07
10	Influenza	972	16.65	.....	...	.....	...	...	.....	15.02	.26
13	Cholera nostras	3	.05	.....	...	.....	...	...	.....	.02	.0004
14	Dysentery	104	1.78	7	6	.10	1	1	.02	8.56	.15
	Bacillary	17	.29	1	1	.02	...	...	.....	1.06	.02
	Entamebic	54	.93	6	5	.03	1	1	.02	6.11	.10
	Unclassified	33	.57	.....	...	.....	...	...	.....	1.39	.02
18	Erysipelas	24	.41	.....	...	.....	...	...	.....	1.18	.02
19b	Dengue	12	.21	.....	...	.....	...	...	.....	.22	.004
19d	German measles	226	3.87	.....	...	.....	...	...	.....	5.04	.09
19g	Mumps	1,119	19.17	1	1	.02	...	...	.....	47.64	.82
20	Purulent infection and septicemia	4	.07	1	1	.02	2	2	.03	1.22	.02
25	Mycoses	3	.05	.....	...	.....	...	...	.....	.30	.005
28–34	Tuberculosis, all	190	3.25	124	100	1.67	24	16	.27	96.35	1.65
28	Tuberculosis of lungs	168	2.88	116	94	1.57	20	13	.22	91.59	1.57
29	Miliary tuberculosis, acute	3	.05	.....	...	.....	3	3	.05	.27	.005
30–34	Tuberculosis of other organs	19	.33	8	6	.10	1	...	.....	4.49	.08
36	Scoliosis (rickets)	2	.03	2	2	.03	...	...	.....	.32	.005
37–38	Venereal diseases, all	6,756	115.74	100	73	1.26	4	3	.05	348.16	5.96
37	Syphilis	1,494	25.58	43	37	.62	3	2	.03	99.13	1.70
38a	Soft chancre	1,173	20.09	2	2	.03	...	...	.....	58.87	1.01
38b	Gonococcus infection	4,090	70.07	50	36	.60	1	1	.02	190.16	3.26
39–45	Cancer and other malignant tumors	13	.22	2	2	.03	7	6	.10	3.17	.05
46	Benign tumors	89	1.52	1	1	.02	...	...	.....	2.72	.05
47–48	Rheumatism, articular, all	571	9.78	19	17	.28	3	3	.05	38.48	.66
47	Acute articular rheumatism	485	8.31	1	1	.02	3	3	.05	26.34	.45
48	Chronic articular rheumatism	86	1.47	18	16	.27	...	...	.....	12.14	.21
50	Diabetes	10	.17	6	4	.07	1	1	.02	1.32	.02
51	Exophthalmic goitre	12	.21	7	6	.10	...	...	.....	1.91	.03
56	Alcoholism and results	973	16.67	26	22	.37	9	9	.15	16.77	.29
57–58	Chronic occupational poisoning	1	.02	.....	...	.....	...	...	.....	.03	.001
59	Other chronic poisoning, including drug habit	25	.43	7	5	.08	1	1	.02	2.02	.03
60	Encephalitis	1	.02	.....	...	.....	1	1	.02	.01	.0002
61	Simple meningitis	2	.03	.....	...	.....	2	2	.03	.13	.002
61a	Epidemic cerebrospinal meningitis	10	.17	.....	...	.....	4	4	.07	.47	.01
62	Locomotor ataxia	4	.07	4	3	.05	...	...	.....	1.53	.03
63	Other diseases of spinal cord	10	.17	7	6	.10	...	...	.....	2.35	.04
64	Cerebral hemorrhage, apoplexy	5	.09	2	1	.02	3	3	.05	1.11	.02
66	Paralysis without specified cause	20	.34	2	2	.03	...	...	.....	2.49	.04
67–68	Mental alienation	190	3.26	209	166	2.78	2	2	.03	49.67	.85
69	Epilepsy	76	1.30	32	25	.42	...	...	.....	7.34	.13
73	Neuralgia and neuritis	304	5.21	21	16	.27	...	...	.....	15.45	.26
75a	Follicular conjunctivitis	9	.15	.....	...	.....	...	...	.....	.20	.003
75b	Trachoma	23	.39	3	3	.05	...	...	.....	1.19	.02
77	Pericarditis	3	.05	.....	...	.....	...	...	.....	.11	.002
78	Acute endocarditis	6	.10	1	1	.02	...	...	.....	.53	.01
79	Organic heart disease	96	1.64	51	44	.74	13	12	.20	13.15	.23
80	Angina pectoris	15	.26	1	1	.02	1	1	.02	.96	.02
81	Diseases of the arteries, atheroma, aneurysm, etc	13	.22	1	1	.02	4	4	.07	1.80	.03

Including those occurring in the United States proper of cases from commands on duty in Alaska or insular possessions.

ratios per 1,000 of mean strength, for enlisted American troops serving in the United Alaska, year 1912.

United States, continental, excluding Alaska, white.									United States, continental, excluding Alaska, colored.									
S. G. O., 55,886.—A. G. O., 57,232.									S. G. O., 2,488.—A. G. O., 2,488.									
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.
15	0.27	.....	.....	.....	2	2	0.03	2.76	0.05	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3	.05	.....	.....	.....	.....	.....	.....	.40	.01	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
819	14.65	.....	.....	.....	.....	.....	.....	1.71	.31	11	4.42	.....	.....	.....	.....	.....	.....	0.15	0.06
56	1.00	.....	.....	.....	.....	.....	.....	1.55	.03	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8	.14	.....	.....	.....	.....	.....	.....	.83	.01	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7	.13	.....	.....	.....	.....	.....	.....	.19	.003	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
713	12.76	.....	.....	.....	.....	.....	.....	14.00	.25	5	2.01	.....	.....	.....	.....	.....	.....	.09	.04
35	.63	.....	.....	.....	.....	.....	.....	.58	.01	6	2.41	.....	.....	.....	.....	.....	.....	.06	.02
6	.11	.....	.....	.....	.....	.....	.....	.52	.01	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
745	13.33	.....	.....	.....	.....	.....	.....	7.28	.13	5	2.01	.....	.....	.....	.....	.....	.....	.10	.04
422	7.55	6	6	0.10	12	12	.21	24.80	.44	4	1.61	.....	.....	.....	.....	.....	.....	.32	.13
14	.25	.....	.....	.....	.....	.....	.....	1.09	.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
76	1.36	.....	.....	.....	.....	.....	.....	4.07	.07	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
956	17.10	.....	.....	.....	.....	.....	.....	14.77	.26	16	6.43	.....	.....	.....	.....	.....	.....	.24	.10
3	.05	.....	.....	.....	.....	.....	.....	.02	.0004	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
99	1.77	6	6	.10	1	1	.02	7.68	.14	5	2.01	1	.....	.....	.....	.....	.....	.89	.36
14	.25	1	1	.02	.....	.....	.....	.88	.02	3	1.21	.....	.....	.....	.....	.....	.....	.18	.07
53	.95	5	5	.09	1	1	.02	5.47	.10	1	.40	1	.....	.....	.....	.....	.....	.64	.26
32	.57	.....	.....	.....	.....	.....	.....	1.33	.02	1	.40	.....	.....	.....	.....	.....	.....	.07	.03
23	.41	.....	.....	.....	.....	.....	.....	1.09	.02	1	.40	.....	.....	.....	.....	.....	.....	.09	.04
12	.21	.....	.....	.....	.....	.....	.....	.22	.004	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
226	4.04	.....	.....	.....	.....	.....	.....	5.01	.09	.....	.....	.....	.....	.....	.....	.....	.....	.03	.01
1,106	19.79	1	1	.02	.....	.....	.....	46.97	.84	13	5.23	.....	.....	.....	.....	.....	.....	.67	.27
4	.07	1	1	.02	2	2	.03	1.22	.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3	.05	.....	.....	.....	.....	.....	.....	.30	.005	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
183	3.27	119	96	1.68	18	12	.21	90.84	1.63	7	2.81	5	4	1.61	6	4	1.61	5.51	2.21
164	2.94	111	90	1.57	16	11	.19	86.41	1.55	4	1.61	5	4	1.61	4	2	.80	5.18	2.08
1	.02	.....	.....	.....	1	1	.02	.02	.0003	2	.80	.....	.....	.....	2	2	.80	.25	.10
18	.32	8	6	.10	1	.....	.....	4.41	.08	1	.40	.....	.....	.....	.....	.....	.....	.08	.03
2	.04	2	2	.03	.....	.....	.....	.32	.01	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6,496	116.24	97	72	1.26	4	3	.05	334.36	5.98	260	104.50	3	3	1.21	.....	.....	.....	13.81	5.55
1,444	25.84	46	35	.61	3	2	.03	93.89	1.68	49	19.69	2	2	.80	.....	.....	.....	5.24	2.11
1,147	20.52	2	2	.03	.....	.....	.....	57.61	1.03	2	10 5	...	.....	.....	.....	.....	.....	1.25	.50
3,903	69.87	49	35	.61	1	1	.02	182.8	3.27	185	74.36	1	1	.40	.....	.....	.....	7.31	2.94
13	.23	2	2	.03	7	6	.10	3.1	.06	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
88	1.57	1	1	.02	.....	.....	.....	2.69	.05	1	.40	.....	.....	.....	.....	.....	.....	.03	.01
547	9.79	18	16	.28	3	3	.05	37.20	.67	26	10.4	1	1	.40	.....	.....	.....	1.28	.51
469	8.39	1	1	.02	3	3	.0	25.2	.45	16	6.4	.....	.....	.....	.....	.....	.....	1.10	.44
76	1.36	17	15	.26	.....	.....	.....	11.9	.21	10	4.02	1	1	.40	.....	.....	.....	.18	.07
10	.18	6	4	.07	1	1	.02	1.32	.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12	.21	7	6	.10	.....	.....	.....	1.91	.03	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
956	17.11	25	22	.38	9	9	.16	15.96	.29	17	6.83	1	.....	.....	.....	.....	.....	.82	.33
1	.02	.....	.....	.....	.....	.....	.....	.06	.001	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
24	.43	6	5	.09	1	1	.02	1.76	.03	1	.40	1	.....	.....	.....	.....	.....	.26	.10
1	.02	.....	.....	.....	1	1	.02	.01	.0002	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2	.04	.....	.....	.....	2	2	.03	.13	.002	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10	.18	.....	.....	.....	4	4	.07	.4	.01	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4	.07	4	3	.07	.....	.....	.....	1.5	.03	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10	.18	7	6	.10	.....	.....	.....	2.3	.04	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5	.09	2	1	.02	3	3	.05	1.11	.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
19	.34	2	2	.03	.....	.....	.....	2.48	.04	1	.40	.....	.....	.....	.....	.....	.....	.01	.004
182	3.26	202	161	2.81	2	2	.03	47.71	.85	8	3.22	7	5	2.01	.....	.....	.....	1.95	.79
72	1.29	31	24	.42	.....	.....	.....	6.96	.12	4	1.61	1	1	.40	.....	.....	.....	.39	.16
288	5.15	20	15	.26	.....	.....	.....	14.43	.26	16	6.43	1	1	.40	.....	.....	.....	1.02	.41
9	.16	.....	.....	.....	.....	.....	.....	.20	.004	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
23	.41	3	3	.05	.....	.....	.....	1.19	.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3	.05	.....	.....	.....	.....	.....	.....	.11	.002	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6	.11	1	1	.02	.....	.....	.....	.53	.01	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
93	1.66	50	43	.75	11	11	.19	12.44	.22	3	1.21	1	1	.40	2	1	.40	.71	.29
15	.27	1	1	.02	1	1	.02	.90	.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12	.21	1	1	.02	3	3	.05	1.80	.03	1	.40	.....	.....	.....	1	1	.40	.003	.001

[1] Excluding those occurring in the United States proper of cases from commands on duty in Alaska or insular possessions.

TABLE No. 71.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with States (continental) excluding*

International classification.	Causes of admission to sick report.	United States, continental, excluding Alaska, total.								
	Mean strength	S. G. O., 58,374.—A. G. O., 59,720.								
		Admissions.		Discharges.			Deaths.			Noneffective.
		Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.
82	Embolism and thrombosis	1	0 02				1	1	0.02	0.01	0.0001
83b	Hemorrhoids	329	5.64	1	1	0.02				10.07	.17
83d	Varicose veins	50	.86							3.59	.06
83e	Varicocele	111	1.90	3	1	.02				6.03	.11
84	Diseases of the lymphatic system	272	4.66							13.93	.24
86	Diseases of the nasal fossæ	774	13.26	3	2	.03				9.82	.17
87	Diseases of the larynx	209	3.58							3.48	.06
88	Diseases of the thyroid body	8	.14	2	1	.02	1	1	.02	.86	.01
89-90	Bronchitis	2,232	38.24	8	7	.12				46.84	.80
91	Broncho-pneumonia	28	.48				4	4	.07	2.92	.05
92	Pneumonia	139	2.38	2	2	.03	12	12	.20	10.80	.18
93	Pleurisy	199	3.41	2	2	.03				13.84	.24
94	Pulmonary congestion and pulmonary apoplexy	23	.39				2	2	.03	.28	.005
96	Asthma	46	.79	6	2	.03				3.46	.06
98a	Hemoptysis	6	.10							.14	.002
98b	Hay fever	4	.07							.17	.003
99a	Diseases of the teeth and gums	305	5.22							4.83	.08
99b	Other diseases of the mouth and annexa	43	.74	1	1	.02				1.87	.03
100	Diseases of the pharynx	4,346	74.45							61.22	1.05
102	Ulcer of stomach	6	.10	3	3	.05	1	1	.02	1.34	.02
103	Other diseases of stomach (cancer excepted)	688	11.79	1	1	.02				11.64	.20
105	Diarrhea and enteritis	1,381	23.66	3	2	.03	1	1	.02	18.69	.32
107	Intestinal parasites	139	2.38							2.76	.05
108	Appendicitis	400	6.85				5	4	.07	30.08	.52
109	Hernia	245	4.20	22	22	.37				25.99	.45
110a	Diseases of the anus and fæcal fistula	37	.63	2	2	.03				2.90	.05
110b	Other diseases of the intestines	1,284	22.00	2	2	.03	1	1	.02	16.87	.29
113	Cirrhosis of liver	4	.07				1	1	.02	.35	.01
114	Biliary calculi	14	.24				1	1	.02	1.07	.02
115	Other diseases of liver and gall bladder	181	3.10							9.87	.17
117	Simple peritonitis	3	.05	1	1	.02	2	2	.03	.28	.005
119	Acute nephritis	27	.46				6	6	.10	1.58	.03
120	Bright's disease	36	.62	16	14	.23	7	6	.10	7.01	.12
122	Other diseases of the kidney and annexa	20	.34	4	3	.05				1.70	.03
124	Diseases of the bladder	163	2.79	30	21	.35				9.65	.17
125	Diseases of the urethra, urinary abscess, etc	80	1.37							1.37	.02
126	Diseases of the prostate	2	.03							.09	.002
127	Diseases of the male genital organs (non-venereal)	344	5.89	2	1	.02				10.14	.17
143	Furuncle and carbuncle	815	13.96							14.28	.24
144	Acute abscess and cellulitis	597	10.23							15.10	.26
146	Diseases of the bones	109	1.87	9	7	.12				9.35	.16
147	Diseases of the joints	188	3.22	15	12	.20				13.70	.23
150	Congenital malformations	230	3.94	1	1	.02				7.27	.12
189Aa	Febricula, simple continued, and other fevers of undetermined causation	113	1.94							2.38	.04
189Ba	Under observation, undiagnosed and unknown	125	2.14	1	1	.02	1	1	.02	8.79	.15
189Bb	Malingering	30	.51							1.34	.02
	AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[3]										
155-163	Suicides, all	18	.31				47	47	.79		
164	Poisoning by food	59	1.01								
165a	Venomous bites and stings	53	.91								
165b	Other poisoning (deleterious gases excepted)	25	.43				6	6	.10		
166	Conflagration	2	.03								
167	Burns (conflagrations excepted)	161	2.76								
168	Absorption of deleterious gases	3	.05				2	2	.03		
169	Drowning, accidental						24	24	.40		

[1] Including those occurring in the United States proper of cases from commands on duty in Alaska or insular possessions.

[2] Noneffectiveness for individual external causes not tabulated.

ratios per 1,000 of mean strength, for enlisted American troops serving in the United Alaska, year 1912—Continued.

United States, continental, excluding Alaska, white.									United States, continental, excluding Alaska, colored.								
S. G. O., 55,886.—A. G. O., 57,232.									S. G. O., 2,488.—A. G. O., 2,488.								
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.
1	0.02				1	1	0.02	0.01	0.0001										
309	5.53	1	1	0.02				9.43	.17	20	8.04							0.63	0.25
50	.89							3.59	.06										
110	1.97	3	1	.02				6.57	.12	1	.40							.06	.02
266	4.76							13.73	.25	6	2.41							.20	.08
761	13.62	3	2	.03				9.69	.17	13	5.23							.13	.05
206	3.69							3.46	.06	3	1.21							.02	.01
8	.14	2	1	.02	1	1	.02	.86	.02										
2,150	38.47	8	7	.12				45.36	.81	82	32.96							1.48	.59
27	.48				4	4	.07	2.73	.05	1	.40							.19	.08
132	2.36	2	2	.03	11	11	.19	10.38	.19	7	2.81				1	1	0.40	.41	.16
189	3.38	2	2	.03				13.01	.23	10	4.02							.83	.33
23	.41				2	2	.03	.28	.005										
43	.77	6	2	.03				3.40	.06	3	1.21							.05	.02
6	.11							.14	.003										
4	.07							.17	.003										
293	5.24							4.49	.08	12	4.82							.34	.14
42	.75	1	1	.02				1.86	.03	1	.40							.01	.004
4,260	76.23							60.08	1.07	86	34.56							1.15	.46
6	.11	3	3	.05	1	1	.02	1.34	.02										
680	12.17	1	1	.02				11.53	.21	8	3.22							.11	.05
1,324	23.69	3	2	.03	1	1	.02	17.73	.32	57	22.91							.96	.39
137	2.45							2.66	.05	2	.80							.10	.04
386	6.91				5	4	.07	29.26	.52	14	5.63							.82	.33
237	4.24	22	22	.38				24.63	.44	8	3.22							1.36	.55
37	.66	2	2	.03				2.90	.05										
1,235	22.10	2	2	.03	1	1	.02	16.06	.29	49	19.69							.81	.33
4	.07				1	1	.02	.35	.01										
14	.25				1	1	.02	1.07	.02										
167	2.99							8.81	.16	14	5.63							1.06	.43
3	.05	1	1	.02	2	2	.03	.28	.005										
26	.47				6	6	.10	1.54	.03	1	.40							.05	.02
34	.61	15	13	.23	7	6	.10	6.52	.12	2	.80	1	1	0.40				.50	.20
20	.36	4	3	.05				1.70	.03										
155	2.77	29	20	.35				9.29	.17	8	3.22	1	1	.40				.36	.14
78	1.40							1.35	.02	2	.80							.02	.01
2	.04							.09	.002										
332	5.94	2	1	.02				9.82	.18	12	4.82							.32	.13
805	14.41							14.11	.25	10	4.02							.17	.07
584	10.45							14.92	.27	13	5.23							.18	.07
99	1.77	9	7	.12				8.79	.16	10	4.02							.56	.23
174	3.11	15	12	.21				12.84	.23	14	5.63							.88	.34
223	3.99	1	1	.02				7.08	.13	7	2.81							.19	.08
110	1.97							2.34	.04	3	1.21							.03	.01
120	2.15	1	1	.02	1	1	.02	8.28	.15	5	2.01							.51	.21
30	.54							1.34	.02										
17	.30				44	44	.77			1	.40				3	3	1.21		
59	1.06																		
51	.91									2	.80								
24	.43				6	6	.10			1	.40								
2	.04																		
155	2.77									6	2.41								
3	.05				2	2	.03												
					23	23	.40								1	1	.40		

[1] Excluding those occurring in the United States proper of cases from commands on duty in Alaska or insular possessions.

TABLE No. 71.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with States (continental) excluding*

International classification.	Causes of admission to sick report.	United States, continental, excluding Alaska, total.									
	Mean strength	S. G. O., 58,374.—A. G. O., 59,720.									
		Admissions.		Discharges.			Deaths.			Noneffective.	
		Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.
	AFFECTIONS PRODUCED BY EXTERNAL CAUSES—continued.										
170	Traumatism by firearms (other than specified)	121	2.07	15	12	0.20	7	7	0.12	.....	.....
170a	Shot by sentry or guard	6	.10	.....	.....	.....	3	3	.05	.....	.....
171	Traumatism by cutting or piercing instruments	617	10.57	8	6	.10	1	1	.02	.....	.....
172	Traumatism by fall	2,771	47.47	24	17	.28	10	10	.17	.....	.....
174	Traumatism by machines	73	1.25	3	3	.05	1	1	.02	.....	.....
175	Traumatism by other crushing	117	2.00	8	5	.08	18	18	.30	.....	.....
176	Injuries by animals	831	14.24	6	5	.08	.....	.....	.....	.....	.....
178	Effects of excessive cold	44	.75	2	2	.03	.....	.....	.....	.....	.....
179	Effects of heat	84	1.44	.....	.....	.....	1	1	.02	.....	.....
180	Effects of lightning	5	.09	.....	.....	.....	2	2	.03	.....	.....
182–4	Homicides, all	6	.10	.....	.....	.....	13	13	.22	.....	.....
185	Fractures, causes not specified	7	.12	.....	.....	.....	1	1	.02	.....	.....
186	Other external violence	3,272	56.05	32	26	.44	.....	.....	.....	.....	.....
	Killed or wounded in action, by bullet	.....	.....	1	.....	.....	.....	.....	.....	.....	.....
155–186	Total for external causes	8,275	141.76	99	77	1.29	136	136	2.28	267.06	4.58
	DISEASES AND INJURIES GROUPED.										
	General diseases	13,639	233.65	315	252	4.22	69	59	.99	658.50	11.28
1–19	Epidemic diseases	4,964	85.04	14	13	.22	15	15	.25	142.76	2.45
20–59	Other general diseases	8,675	148.61	301	239	4.00	54	44	.74	515.74	8.83
	Diseases of the nervous system and organs of special sense	1,606	27.51	344	277	4.64	13	13	.22	124.69	2.14
60–74	Of the nervous system	802	13.74	298	237	3.97	12	12	.20	90.48	1.55
75	Of the eye and its annexa	526	9.01	15	15	.25	.....	.....	.....	19.54	.33
76	Of the ear and its annexa	278	4.76	31	25	.42	1	1	.02	14.67	.25
77–85	Diseases of the circulatory system	986	16.89	67	56	.94	19	18	.30	56.19	.96
86–98	Diseases of the respiratory system	3,699	63.37	24	17	.28	20	20	.33	93.49	1.60
99–118	Diseases of the digestive system	9,082	155.58	36	35	.59	13	12	.20	190.10	3.26
119–127	Diseases of the genito-urinary system	702	12.03	53	39	.65	13	12	.20	32.48	.56
142–145	Diseases of the skin and cellular tissue	3,104	53.17	11	11	.18	1	1	.02	74.51	1.28
146–149	Diseases of the organs of locomotion	1,503	25.75	117	99	1.66	.....	.....	.....	67.39	1.15
150	Malformations, etc	230	3.94	1	1	.02	.....	.....	.....	7.27	.12
189	Ill-defined diseases	295	5.05	1	1	.02	1	1	.02	12.73	.22
	Total for disease	34,846	596.94	969	788	13.19	149	136	2.28	1,317.34	22.57
155–186	External causes	8,275	141.76	99	77	1.29	136	136	2.28	267.06	4.58
	Total for disease and external causes	43,121	738.70	1,068	865	14.48	285	272	4.55	1,584.40	27.15

[1] Including those occurring in the United States proper of cases from commands on duty in Alaska o insular possessions.

atios per 1,000 of mean strength, for enlisted American troops serving in the United Alaska, year 1912—Continued.

United States, continental, excluding Alaska, white.									United States, continental, excluding Alaska colored.								
S. G. O., 55,886.—A. G. O., 57,232.									S. G. O., 2,488.—A. G. O., 2,488.								
Admissions.		Discharges.			Deaths.			Noneffective.	Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.
119	2.13	15	13	0.23	6	6	0.10	.....	.....	2	0.8	...	...	...	1	1	0.4	.....	.....
6	.11	.....	.....	.....	2	2	.03	.....	.....	.....	.....	...	...	...	1	1	.4	.....	.....
583	10.38	8	6	.10	1	1	.02	.....	.....	3	14.8	...	...	...	...	...	...	.....	.....
2,635	47.15	24	17	.30	10	10	.17	.....	.....	13	54.6	...	...	...	...	...	...	.....	.....
71	1.27	3	3	.05	1	1	.02	.....	.....	2	.8	...	...	...	...	...	...	.....	.....
115	2.06	7	5	.09	17	17	.30	.....	.....	2	.8	1	...	...	1	1	.4	.....	.....
755	13.51	5	4	.07	...	...	...	.....	.....	76	30.55	1	1	0.4	...	...	...	.....	.....
36	.64	2	2	.03	...	...	...	.....	.....	8	3.2	...	...	...	...	...	...	.....	.....
82	1.47	.....	...	.....	1	1	.02	.....	.....	2	.8	...	...	...	...	...	...	.....	.....
5	.09	.....	...	.....	2	2	.03	.....	.....	.....	.....	...	...	...	...	...	...	.....	.....
4	.07	.....	...	.....	9	9	.16	.....	.....	2	.8	...	...	...	4	4	1.6	.....	.....
7	.13	.....	...	.....	1	1	.02	.....	.....	.....	.....	...	...	...	...	...	...	.....	.....
3,067	54.88	32	26	.45	...	...	...	.....	.....	12	48.6	...	...	...	...	...	...	.....	.....
.....	.....	1	...	.....	...	...	...	.....	.....	.....	.....	...	...	...	...	...	...	.....	.....
7,877	140.95	97	76	1.33	125	125	2.18	252.00	4.51	398	59.97	2	1	.4	11	11	4.4	15	6.06
13,262	237.30	308	244	4.26	63	55	.96	633.99	11.34	37	151.53	12	8	3.22	4	4	1.6	24	9.85
4,859	87.66	13	13	.23	15	15	.26	139.95	2.50	65	26.15	1	...	...	...	...	...	2	1.13
8,363	149.64	299	231	4.04	38	40	.70	494.04	8.84	312	125.4	11	8	3.22	4	4	1.6	21	8.72
1,537	27.50	335	270	4.72	13	13	.23	119.99	2.15	69	27.73	9	7	2.82	...	...	...	4.7	1.89
769	13.76	283	230	4.02	12	12	.21	86.94	1.56	33	13.26	9	7	2.82	...	...	...	3.5	1.42
501	8.95	15	15	.26	...	...	...	18.62	.33	26	10.45	...	...	...	...	...	...	.9	.37
268	4.80	31	25	.44	1	1	.02	14.43	.26	10	4.02	...	...	...	...	...	...	.23	.09
95	17.00	66	55	.96	16	16	.28	54.46	.97	36	14.47	1	1	.40	3	2	.8	1.7	.70
3,58	64.06	24	17	.30	19	19	.33	90.37	1.62	119	47.83	...	...	...	1	1	4	3.1	1.25
8,831	158.02	36	35	.61	13	12	.21	183.36	3.28	251	100.88	...	...	...	...	...	...	6.7	2.71
675	12.08	51	37	.65	13	12	.21	31.20	.56	24	10.85	2	2	.8	...	...	...	1.2	.52
3,04	54.40	11	11	.19	1	1	.02	72.97	1.31	64	25.72	...	...	...	...	...	...	1.5	.62
1,427	25.53	116	98	1.71	...	...	...	64.27	1.15	76	30.55	1	1	.40	...	...	...	3.1	1.27
223	3.99	1	1	.02	...	...	...	7.08	.13	7	2.81	...	...	...	...	...	...	.1	.08
28.	5.14	1	1	.02	1	1	.02	12.18	.22	8	3.22	...	...	...	...	...	...	.5	.22
33,812	605.02	944	769	13.44	139	129	2.25	1,269.82	22.72	1,034	415.56	25	19	7.64	10	7	2.8	47.5	19.09
7,877	140.95	97	76	1.32	125	125	2.18	252.00	4.51	398	59.97	2	1	.40	11	11	4.40	15.00	6.06
41,689	745.97	1,041	845	14.77	264	254	4.43	1,521.83	27.23	1,432	575.56	27	20	8.04	21	18	7.23	62.5	25.15

[1] Excluding those occurring in the United States proper of cases from commands on duty in Alaska or insular possessions.

TABLE 72.—*Admissions to sick report, discharges, deaths, and noneffectiveness, wit men, yea*

International classification.	Causes of admission to sick report.	Total.								
	Mean strength	12,357.								
		Admissions.		Discharges.		Deaths.			Noneffective.	
		Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.
1	Typhoid fever	5	0.40	...	...	....	...	...	....	1.14	0.09
1a	Paratyphoid fever	1	.08	...	...	....	...	...	....	.04	.004
4	Malaria	2,113	171.00	...	...	....	4	4	0.32	43.38	3.51
	Estivo-autumnal fever	572	46.29	...	...	....	4	4	.32	15.22	1.23
	Malarial cachexia	5	.40	...	...	....	...	...	....	.49	.04
	Quartan malarial fever	11	.89	...	...	....	...	...	....	.28	.02
	Tertian malarial fever	1,460	118.15	...	...	....	...	...	....	26.15	2.12
	Undetermined malarial fever	65	5.26	...	...	....	...	...	....	1.23	.10
5b	Vaccinia	13	1.05	...	...	....	...	...	....	.19	.02
6	Measles	34	2.75	...	...	....	...	...	....	2.96	.24
9	Diphtheria	2	.16	...	...	....	...	...	....	.30	.02
10	Influenza	41	3.32	...	...	....	...	...	....	.79	.06
14	Dysentery	209	16.9	...	1	0.08	1	1	.08	13.89	1.12
	Bacillary	11	.89	...	...	....	...	...	....	.44	.04
	Entamœbic	167	13.5	...	1	.08	1	1	.08	12.35	1.00
	Unclassified	31	2.51	...	...	....	...	...	....	1.10	.09
18	Erysipelas	2	.16	...	...	....	...	...	....	.04	.003
19b	Dengue	1,346	108.93	...	...	....	...	...	....	23.53	1.90
19d	German measles	1	.08	...	...	....	...	...	....	.02	.001
19e	Hemoglobinuric fever	...	....	...	...	....	...	...	....	.11	.01
19g	Mumps	121	9.79	...	...	....	...	...	....	9.32	.76
20	Purulent infection and septicemia	1	.08	...	...	....	1	1	.08	.02	.001
25	Mycoses	6	.49	...	...	....	...	...	....	.40	.03
28–34	Tuberculosis, all	62	5.02	...	18	1.46	...	7	.57	6.57	.53
28	Tuberculosis of lungs	57	4.61	...	17	1.38	...	6	.49	5.54	.45
30–34	Tuberculosis of other organs	5	.40	...	1	.08	...	1	.08	1.03	.08
36	Scoliosis (rickets)	...	....	...	...	....	...	...	....	.04	.003
37–38	Venereal diseases, all	3,079	249.17	...	14	1.13	3	3	.24	204.55	16.55
37	Syphilis	528	42.73	...	5	.40	3	3	.24	38.03	3.08
38a	Soft chancre	832	67.33	...	...	....	...	...	....	53.71	4.35
38b	Gonococcus infection	1,719	139.11	...	9	.73	...	...	....	112.80	9.13
39–45	Cancer and other malignant tumors	2	.16	...	...	....	...	1	.08	.41	.03
46	Benign tumors	12	.97	...	...	....	...	...	....	.50	.04
47–48	Rheumatism, articular, all	80	6.47	...	1	.08	1	1	.08	4.11	.44
47	Acute articular rheumatism	60	4.86	...	...	....	1	1	.08	2.79	.23
48	Chronic articular rheumatism	20	1.62	...	1	.08	...	...	....	1.33	.11
50	Diabetes	2	.16	...	1	.08	...	...	....	.17	.01
51	Exophthalmic goiter	2	.16	...	1	.08	...	...	....	.40	.03
56	Alcoholism and results	262	21.20	...	3	.24	3	3	.24	4.36	.35
59	Other chronic poisoning, including drug habit	2	.16	...	2	.16	...	...	....	.27	.02
61a	Epidemic cerebrospinal meningitis	2	.16	...	...	....	1	1	.08	.22	.02
62	Locomotor ataxia	2	.16	...	1	.08	...	...	....	.37	.03
63	Other diseases of spinal cord	...	....	...	...	....	...	...	....	.03	.002
64	Cerebral hemorrhage, apoplexy	...	....	...	1	.08	...	...	....	.04	.003
66	Paralysis without specified cause	2	.16	...	1	.08	...	...	....	.29	.02
67–68	Mental alienation	44	3.56	...	27	2.19	...	...	....	4.25	.34
69	Epilepsy	8	.65	...	3	.24	...	...	....	.52	.04
73	Neuralgia and neuritis	102	8.25	...	2	.16	...	...	....	4.46	.36
75b	Trachoma	2	.16	...	...	....	...	...	....	.04	.004
77	Pericarditis	3	.24	...	...	....	...	...	....	.62	.05
78	Acute endocarditis	...	....	...	...	....	...	...	....	.12	.01
79	Organic heart disease	13	1.05	...	1	.08	1	2	.16	.75	.06
80	Angina pectoris	1	.08	...	...	....	1	1	.08	.003	.000
81	Diseases of the arteries, atheroma, aneurism, etc	3	.24	...	...	....	1	1	.08	.24	.02
83b	Hemorrhoids	108	8.74	...	...	....	...	...	....	3.62	.29
83 1	Varicose veins	7	.57	...	...	....	...	...	....	.45	.04
83e	Varicocele	52	4.21	...	...	....	...	...	....	3.00	.24
84	Diseases of the lymphatic system	132	10.68	...	...	....	...	...	....	8.46	.69
86	Diseases of the nasal fossæ	137	11.09	...	...	....	...	...	....	2.74	.22
87	Diseases of the larynx	11	.89	...	...	....	...	...	....	.12	.01
88	Diseases of the thyroid body	3	.24	...	1	.08	...	...	....	.12	.01
89–90	Bronchitis	269	21.77	...	...	....	...	...	....	7.22	.58

[1] Number of discharges and deaths which actually occurred.

tios per 1,000 of mean strength, for Philippine Islands, American troops, enlisted 912.

White.									Colored.								
11,006.									1,351.								
Admissions.		Discharges.			Deaths.			Noneffective.	Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.
5	0.45							1.14	0.10										
1	.09							.04	.004										
2,051	186.35				4	4	0.36	41.84	3.80	62	45.89							1.54	1.14
537	48.79				4	4	.36	14.29	1.30	35	25.91							.93	.69
5	.45							.49	.04										
10	.91							.25	.02	1	.74							.02	.02
1,449	131.66							25.90	2.35	11	8.14							.26	.19
50	4.54							.90	.08	15	11.10							.33	.24
12	1.09							.19	.02	1	.74							.01	.01
20	1.82							2.16	.20	14	10.36							.81	.60
2	.18							.30	.03										
24	2.18							.45	.04	17	12.58							.34	.25
199	18.08				1	1	.09	13.37	1.21	10	7.40		1	0.74				.53	.39
11	1.00							.44	.04										
159	14.45				1	1	.09	11.94	1.08	8	5.92		1	.74				.41	.31
29	2.63							.99	.09	2	1.48							.11	.08
2	.18							.04	.004										
1,119	101.67							18.58	1.69	227	168.02							4.95	3.67
1	.09							.02	.001										
								.11	.02										
117	10.63							8.84	.80	4	2.96							.48	.36
1	.09				1	1	.09	.02	.001										
6	.54							.40	.04										
48	4.36		17	1.54		5	.45	5.15	.47	14	10.36		1	.74		2	1.48	1.42	1.05
45	4.09		16	1.45		4	.36	4.37	.40	12	8.88		1	.74		2	1.48	1.17	.86
3	.27		1	.09		1	.09	.78	.08	2	1.48							.25	.19
								.04	.003										
2,371	215.43		14	1.27	2	2	.18	175.23	15.92	708	524.06				1	1	.74	29.32	21.70
496	45.07		5	.45	2	2	.18	35.24	3.20	32	23.69				1	1	.74	2.79	2.07
617	56.06							45.08	4.10	215	159.14							8.64	6.39
1,258	114.30		9	.82				94.92	8.62	461	341.23							17.89	13.24
2	.18					1	.09	.41	.04										
10	.91							.48	.04	2	1.48							.02	.02
62	5.63		1	.09				3.70	.34	18	13.32				1	1	.74	.41	.30
44	4.00							2.54	.23	16	11.84				1	1	.74	.24	.18
18	1.64		1	.09				1.16	.11	2	1.48							.17	.12
2	.18		1	.09				.17	.02										
2	.18		1	.09				.40	.04										
244	22.17		2	.18	3	3	.27	4.01	.36	18	13.32		1	.74				.35	.26
1	.09		1	.09				.18	.02	1	.74		1	.74				.09	.07
2	.18				1	1	.09	.22	.02										
2	.18		1	.09				.37	.03										
								.03	.002										
			1	.09				.04	.003										
2	.18		1	.09				.29	.03										
40	3.63		25	2.27				4.01	.36	4	2.96		2	1.48				.25	.18
8	.73		3	.27				.52	.05										
79	7.18		2	.18				3.53	.32	23	17.02							.94	.69
2	.18							.04	.004										
3	.27							.62	.06										
								.12	.01										
13	1.18		1	.09	1	1	.09	.75	.07							1	.74		
1	.09				1	1	.09	.003	.0002										
2	.18							.21	.02	1	.74				1	1	.74	.04	.03
82	7.45							3.08	.28	26	19.24							.54	.40
6	.54							.40	.04	1	.74							.05	.04
51	4.63							2.99	.27	1	.74							.01	.01
123	11.18							8.22	.75	9	6.66							.25	.18
118	10.72							2.57	.23	19	14.06							.16	.12
5	.45							.05	.004	6	4.44							.07	.05
3	.27		1	.09				.12	.01										
204	18.54							5.88	.53	65	48.11							1.34	.99

Number of discharges and deaths including those of cases invalided home and deducted from the ited States.

TABLE 72.—*Admissions to sick report, discharges, deaths, and noneffectiveness, wit men, yea*

International classification.	Causes of admission to sick report.	Total.								
	Mean strength	12,357.								
		Admissions.		Discharges.			Deaths.			Noneffective.
		Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.
91	Bronchopneumonia	3	0.24							0.80	0.0
92	Pneumonia	18	1.46							2.12	.1
93	Pleurisy	33	2.67							2.69	.2
96	Asthma	13	1.05		4	0.32				.48	.0
99a	Diseases of the teeth and gums	137	11.09							2.99	.2
99b	Other diseases of the mouth and annexa	11	.89							.23	.0
100	Diseases of the pharynx	426	34.47							7.45	.6
102	Ulcer of stomach	3	.24							.42	.0
103	Other diseases of stomach (cancer excepted)	250	20.23				1	1	0.08	5.64	.4
105	Diarrhea and enteritis	750	60.69		1	.08				13.02	1.0
107	Intestinal parasites	24	1.94							.49	.0
108	Appendicitis	70	5.66				2	3	.24	7.25	.5
109	Hernia	42	3.40							5.14	.4
110a	Diseases of the anus, and fecal fistula	19	1.54							1.52	.1
110b	Other diseases of the intestines	616	49.85							8.09	.6
114	Biliary calculi	3	.24							.14	.0
115	Other diseases of liver and gall bladder	63	5.10				4	4	.32	4.26	.3
120	Bright's disease	9	.73		1	.08	1	2	.16	.78	.0
122	Other diseases of the kidney and annexa	4	.32							.08	.0
124	Diseases of the bladder	28	2.27		3	.24				1.24	.1
125	Diseases of the urethra, urinary abscess, etc.	20	1.62							.50	.0
126	Diseases of the prostate	2	.16							.19	.0
127	Diseases of the male genital organs (nonvenereal)	69	5.58							3.67	.3
143	Furuncle and carbuncle	440	35.61							10.05	.8
144	Acute abscess and cellulitis	325	26.30							9.18	.7
146	Diseases of the bones	25	2.02							2.06	.1
147	Diseases of the joints	41	3.32		3	.24				2.57	.2
150	Congenital malformations	45	3.64							1.50	.1
189Aa	Febricula, simple continued, and other fevers of undetermined causation	191	15.46							2.89	.2
189Ba	Under observation, undiagnosed and unknown	14	1.13							.41	.0
189Bb	Malingering	3	.24							.22	.0
	AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[3]										
155–163	Suicides, all	2	.16				3	3	24		
164	Poisoning by food	172	13.92								
165a	Venomous bites and stings	27	2.19								
165b	Other poisoning (deleterious gases excepted)	2	.16								
167	Burns (conflagrations excepted)	18	1.45								
168	Absorption of deleterious gases	1	.08								
169	Drowning, accidental						13	13	1.05		
170	Traumatism by firearms (other than specified)	25	2.02		1	.08	3	3	.24		
170a	Shot by sentry or guard	1	.08				1	1	.08		
171	Traumatism by cutting or piercing instruments	201	16.26		2	.16					
172	Traumatism by fall	582	47.10		6	.49	3	3	.24		
174	Traumatism by machines	8	.65								
175	Traumatism by other crushing	26	2.10		3	.24	2	2	.16		
176	Injuries by animals	216	17.48								
179	Effect of heat	52	4.21								
182–4	Homicides, all						4	4	.32		
186	Other external violence	787	63.69		4	.32	1	1	.08		
	Killed or wounded in action—										
	By bullet	1	.08								
	By bolo, kris, etc	1	.08								
155–186	Total external causes	2,121	171.64		16	1.29	30	30	2.43	60.40	4.

[1] Number of discharges and deaths which actually occurred.
[3] Noneffectiveness for individual external causes not tabulated.

atios per 1,000 of mean strength, for Philippine Islands, American troops, enlisted 912—Continued.

White.									Colored.							
11,006.									1,351.							
Admissions.		Discharges.			Deaths.			Noneffective.	Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.
3	0.27							0.80	0.07										
13	1.18							1.85	.17	5	3.70							0.27	0.20
24	2.18							2.33	.21	9	6.66							.36	.27
12	1.09		4	0.36				.47	.04	1	.74							.01	.01
127	11.54							2.88	.26	10	7.40							.11	.08
10	.91							.22	.02	1	.74							.01	.01
363	32.98							6.42	.58	63	46.63							1.03	.76
2	.18							.38	.03	1	.74							.04	.03
219	19.90				1	1	0.09	5.33	.48	31	22.95							.31	.23
638	57.97		1	.09				11.83	1.07	112	82.90							1.20	.89
22	2.00							.47	.04	2	1.48							.02	.01
64	5.82				2	3	.27	6.84	.62	6	4.44							.41	.30
31	2.82							4.17	.38	11	8.14							.97	.72
17	1.54							1.46	.13	2	1.48							.07	.05
459	41.70							6.49	.59	157	116.21							1.59	1.18
3	.27							.14	.01										
56	5.09				3	3	.27	4.03	.37	7	5.18				1	1	0.74	.23	.17
7	.64		1	.09	1	2	.18	.62	.06	2	1.48							.16	.12
4	.36							.08	.01										
25	2.27		3	.27				1.19	.11	3	2.22							.05	.03
16	1.45							.43	.04	4	2.96							.06	.05
2	.18							.19	.02										
63	5.72							3.46	.31	6	4.44							.21	.15
379	34.44							9.04	.82	61	45.15							1.01	.75
282	25.62							8.08	.73	43	31.83							1.10	.82
20	1.82							1.67	.15	5	3.70							.40	.29
39	3.54		3	.27				2.17	.20	2	1.48							.40	.30
42	3.82							1.39	.13	3	2.22							.11	.08
186	16.90							2.86	.26	5	3.70							.04	.03
14	1.27							.41	.04										
1	.09							.09	.01	2	1.48							.13	.10
2	.18				3	3	.27												
172	15.63																		
23	2.09									4	2.96								
2	.18																		
16	1.45									2	1.48								
					12	12	1.09								1	1	.74		
24	2.18		1	.09	3	3	.27			1	.74								
										1	.74				1	1	.74		
155	14.08		2	.18						46	34.05								
474	43.07		6	.54	3	3	.27			108	79.94								
8	.73																		
21	1.91		2	.18	2	2	.18			5	3.70		1	0.74					
213	19.35									3	2.22								
51	4.63									1	.74								
					3	3	.27								1	1	.74		
646	58.70		4	.36	1	1	.09			141	104.37								
1	.09																		
1	.09																		
1,809	164.36		15	1.36	27	27	2.45	54.69	4.97	312	230.94		1	.74	3	3	2.22	5.71	4.22

[1] Number of discharges and deaths including those of cases invalided home and deducted from the nited States.

TABLE 72.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with men, year*

International classification.	Mean strength	Total. 12,357.								
	Causes of admission to sick report.	Admissions.		Discharges.			Deaths.			Noneffective.	
		Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.
	DISEASES AND INJURIES GROUPED.										
	General diseases	7,458	603.54	...	42	3.40	14	22	1.62	318.20	25.75
1–19	Epidemic diseases	3,941	318.93	...	1	.08	5	5	.40	96.06	7.77
20–59	Other general diseases	3,517	284.62	...	41	3.32	9	17	1.38	222.14	17.98
60–74	Diseases of the nervous system and organs of special sense	454	36.74	...	40	5.24	1	1	.08	20.18	1.63
60–74	Of the nervous system	207	16.75	...	36	2.91	1	1	.08	12.55	1.02
75	Of the eye and its annexa	129	10.44	...	...	...	...	...	...	3.78	.31
76	Of the ear and its annexa	118	9.55	...	4	.32	...	...	...	3.86	.31
77–85	Diseases of the circulatory system	348	28.16	...	2	.16	3	4	.32	18.51	1.50
86–98	Diseases of the respiratory system	488	39.49	...	5	.40	...	...	...	16.31	1.32
99–118	Diseases of the digestive system	2,417	195.60	...	1	.08	7	8	.65	56.79	4.60
119–127	Diseases of the genito-urinary system	139	11.25	...	5	.40	1	2	.16	6.69	.54
142–145	Diseases of the skin and cellular tissue	1,353	109.49	...	...	...	...	...	...	37.23	3.01
146–149	Diseases of the organs of locomotion	372	30.10	...	8	.65	...	...	...	13.39	1.08
150	Malformations, etc	45	3.64	...	...	...	...	...	...	1.50	.12
189	Ill-defined diseases	214	17.32	...	...	...	...	...	...	3.59	.29
	Total for disease	13,288	1,075.34	...	103	8.34	26	37	2.99	492.39	39.85
155–186	External causes	2,121	171.64	...	16	1.29	30	30	2.43	60.40	4.89
	Total for disease and external causes	15,409	1,246.99	...	119	9.63	56	67	5.42	552.79	44.74

[1] Number of discharges and deaths which actually occurred.

ratios per 1,000 of mean strength, for Philippine Islands, American troops, enlisted 1912—Continued.

White.									Colored.								
11,006.									1,351.								
Admissions.		Discharges.			Deaths.			Noneffective.	Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.
6,358	577.68	...	38	3.45	12	18	1.64	277.92	25.25	1,100	814.21	...	4	2.96	2	4	2.96	40.28	29.82
3,602	327.28	...	...	.....	5	5	.45	87.39	7.94	339	250.92	...	1	.74	...	...	....	8.67	6.42
2,756	250.41	...	38	3.45	7	13	1.18	190.53	17.31	761	563.29	...	3	2.22	2	4	2.96	31.61	23.40
401	36.43	...	38	3.45	1	1	.09	18.31	1.66	53	39.23	...	2	1.48	...	...	....	1.87	1.38
180	16.35	...	34	3.09	1	1	.09	11.37	1.03	27	19.99	...	2	1.48	...	...	....	1.18	.88
107	9.72	...	...	.....	...	...	....	3.22	.29	22	16.28	...	...	.....	...	...	....	.55	.41
114	10.36	...	4	.36	...	...	....	3.72	.34	4	2.96	...	...	.....	...	...	....	.13	.10
306	27.80	...	2	.18	2	2	.18	17.52	1.59	42	31.09	...	...	.....	1	2	1.48	.99	.73
383	34.80	...	5	.45	...	...	....	14.08	1.28	105	77.72	...	...	.....	...	...	....	2.22	1.65
2,014	182.99	...	1	.09	6	7	.64	50.80	4.62	403	298.30	...	...	.....	1	1	.74	5.98	4.43
124	11.27	...	5	.45	1	2	.18	6.22	.56	15	11.10	...	...	.....	...	...	....	.48	.35
1,164	105.76	...	...	.....	...	...	....	33.12	3.01	189	139.90	...	...	.....	...	...	....	4.11	3.04
283	25.71	...	8	.73	...	...	....	10.32	.94	89	65.88	...	...	.....	...	...	....	3.07	2.27
42	3.82	...	...	.....	...	...	....	1.39	.13	3	2.22	...	...	.....	...	...	....	.11	.08
207	18.81	...	...	.....	...	...	....	3.42	.31	7	5.18	...	...	.....	...	...	....	.17	.12
11,282	1,025.08	...	97	8.81	22	30	2.73	433.11	39.35	2,006	1,484.83	...	6	4.44	4	7	5.18	59.28	43.88
1,809	164.36	...	15	1.36	27	27	2.45	54.69	4.97	312	230.94	...	1	.74	3	3	2.22	5.71	4.22
13,091	1,189.44	...	112	10.18	49	57	5.18	487.80	44.32	2,318	1,715.77	...	7	5.18	7	10	7.40	64.99	48.10

[2] Number of discharges and deaths including those of cases invalided home and deducted from the United States.

TABLE No. 73.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with and China for*

International classification.	Causes of admission to sick report.	Alaska. Mean strength 1,197. Admissions. Number.	Admissions. Ratio.	Discharges. Number.[1]	Discharges. Number.[2]	Discharges. Ratio.	Deaths. Number.[1]	Deaths. Number.[2]	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
1	Typhoid fever										
4	Malaria	6	5.01							0.12	0.10
	Æstivo-autumnal fever										
	Malarial cachexia										
	Quartan malarial fever										
	Tertian malarial fever	6	5.01							.12	.10
	Undetermined malarial fever										
6	Measles	26	21.72				1	1	0.83	1.28	1.07
9	Diphtheria										
10	Influenza	7	5.85							.11	.09
14	Dysentery										
	Bacillary										
	Entamœbic										
	Unclassified										
18	Erysipelas	1	.83							.02	.02
19g	Mumps	8	6.68							.46	.38
28–34	Tuberculosis, all	5	4.18					1	.83	.46	.38
28	Tuberculosis of lungs	4	3.34					1	.83	.40	.34
30–34	Tuberculosis of other organs	1	.83							.05	.04
37–38	Venereal diseases, all	50	41.77		1	0.83				3.10	2.59
37	Syphilis	9	7.52		1	.83				1.16	.97
38a	Soft chancre	4	3.34							.31	.26
38b	Gonococcus infection	37	30.91							1.63	1.36
39–45	Cancer and other malignant tumors										
46	Benign tumors	2	1.67							.03	.02
47–48	Rheumatism, articular, all	8	6.68		1	.83				.22	.18
47	Acute articular rheumatism	7	5.85							.12	.10
48	Chronic articular rheumatism	1	.83		1	.83				.10	.08
50	Diabetes	1	.83		1	.83				.11	.09
56	Alcoholism and results	36	30.07		1	.83				.68	.57
59	Other chronic poisoning, including drug habit										
60	Encephalitis										
63	Other diseases of spinal cord										
66	Paralysis without specific cause										
67–68	Mental alienation	8	6.68		1	.83				.33	.27
69	Epilepsy										
73	Neuralgia and neuritis	6	5.01		1	.83				.28	.24
77	Pericarditis	1	.83							.03	.02
79	Organic heart disease	3	2.51							.12	.10
80	Angina pectoris										
81	Diseases of the arteries, atheroma, aneurism, etc										
83b	Hemorrhoids	5	4.18							.18	.15
83d	Varicose veins										
83e	Varicocele										
84	Diseases of the lymphatic system	1	.83							.05	.04
86	Diseases of the nasal fossæ	7	5.85							.05	.04
87	Diseases of the larynx	7	5.85							.07	.06
88	Diseases of the thyroid body										
89–90	Bronchitis	17	14.20							.33	.28
91	Broncho-pneumonia									.07	.05
92	Pneumonia	2	1.67							.07	.06
93	Pleurisy	1	.83							.01	.01
96	Asthma	1	.83							.14	.12
98a	Hæmoptysis										
99a	Diseases of the teeth and gums	10	8.35							.14	.12
99b	Other diseases of the mouth and annexa	1	.83							.005	.005
100	Diseases of the pharynx	34	28.40							.46	.38
103	Diseases of stomach (cancer excepted)	20	16.71							.27	.22
105	Diarrhœa and enteritis	13	10.86				1	1	.83	.14	.12
107	Intestinal parasites	2	1.67							.02	.02
108	Appendicitis	8	6.68							.41	.34
109	Hernia	2	1.67							.03	.03
110a	Diseases of the anus and fæcal fistula										
110b	Other diseases of the intestines	13	10.86							.11	.10
113	Cirrhosis of liver						1	1	.83		

[1] Number of discharges or deaths which actually occurred.

ratios per 1,000 of mean strength, for enlisted American troops serving in Alaska, Hawaii, the year 1912.

Hawaii.									China.								
3,376.									1,097.								
Admissions.		Discharges.			Deaths.			Noneffective.	Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.
1	0.30							0.07	0.02										
21	6.22							.49	.15	6	5.47							0.09	0.08
										1	.91							.01	.01
										1	.91							.03	.02
21	6.22							.49	.15	4	3.65							.05	.04
										4	3.65							.22	.20
										1	.91							.05	.04
130	38.51							2.10	.62	47	42.84							.59	.54
5	1.48							.28	.08	11	10.03							.48	.44
										4	3.65							.12	.11
5	1.48							.28	.08	4	3.65							.30	.27
										3	2.73							.06	.06
15	4.44							.80	.24	11	10.03							.54	.49
7	2.07		5	1.48		1	0.30	1.13	.33										
5	1.48		4	1.18		1	.30	.42	.12										
2	.59		1	.30				.71	.21										
415	122.93		9	2.67		1	.30	29.34	8.69	223	203.28				1	1	0.91	14.87	13.55
138	40.88		4	1.18		1	.30	10.70	3.17	32	29.17							2.62	2.39
89	26.36							5.35	1.58	109	99.36				1	1	.91	7.94	7.24
188	55.69		5	1.48				13.28	3.93	82	74.75							4.31	3.93
1	.30							.04	.01										
16	4.74							.79	.21	3	2.73							.06	.05
23	6.81							1.65	.49	8	7.29				1	1	.91	.73	.66
17	5.03							.93	.27	3	2.73				1	1	.91	.73	.66
6	1.78							.73	.22	5	4.56								
52	15.40							.40	.12	25	22.79							.27	.25
5	1.48							.08	.02										
1	.30				1	1	.30	.01	.002										
1	.30							.10	.03	1	.91				1	0.91		.04	.03
1	.30							.13	.04	1	.91							.12	.11
17	5.04		10	2.96				1.34	.40	6	5.47		4	3.65				.47	.43
5	1.48		2	.59				.39	.11	1	.91		1	.91				.05	.04
10	2.96		2	.59				.79	.23	4	3.65							.03	.02
1	.30							.10	.03										
11	3.26		5	1.48				.88	.26	1	.91							.01	.01
										1	.91				1	1	0.91	.002	.002
										1	.91							.04	.03
21	6.22							.65	.19	7	6.38							.15	.14
1	.30							.13	.04										
15	4.44		2	.59				1.48	.44	3	2.73							.05	.04
34	10.07							1.15	.34	9	8.20							.36	.32
86	25.47		1	.30				1.90	.56	5	4.56							.02	.01
6	1.78							.09	.03	4	3.65							.04	.03
1	.30							.16	.05										
76	22.51		1	.30				2.34	.69	18	16.41							.28	.26
2	.59							.17	.05	11	10.03							.63	.57
10	2.96							.83	.25	1	.91							.13	.12
2	.59							.20	.06										
										2	1.82							.05	.04
105	31.10							2.31	.68										
5	1.48							.11	.03										
170	50.35							3.07	.91	35	31.91							.51	.46
42	12.44							1.50	.44	15	13.67							.13	.12
149	44.14							2.01	.60	37	33.73							.37	.34
4	1.18							.05	.01	5	4.56							.05	.05
26	7.70							2.20	.65	9	8.20				1	1	.91	.34	.31
5	1.48							.87	.26	3	2.73							.25	.23
4	1.18							.29	.09	7	6.38							.38	.35
64	18.96							1.60	.47	11	10.03							.13	.11
1	.30							.11	.03										

[1] Number of discharges or deaths including those of cases invalided home and deducted from the United States.

TABLE NO. 73.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with and China for the*

International classification.	Causes of admission to sick report.	Alaska. Mean strength 1,197. Admissions. Number.	Admissions. Ratio.	Discharges. Number.[1]	Discharges. Number.[2]	Discharges. Ratio.	Deaths. Number.[1]	Deaths. Number.[2]	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
114	Biliary calculi										
115	Other diseases of liver and gall bladder	2	1.67							0.07	0.06
120	Bright's disease										
122	Other diseases of the kidney and annexa										
124	Diseases of the bladder	1	.83							.02	.01
125	Diseases of the urethra, urinary abscess, etc.										
126	Diseases of the prostate										
127	Diseases of the male genital organs (non-venereal)	10	8.35							.32	.26
143	Furuncle and carbuncle	10	8.35							.25	.21
144	Acute abscess and cellulitis	11	9.19							.15	.12
146	Diseases of the bones	2	1.67							.12	.10
147	Diseases of the joints	6	5.01							.44	.37
150	Congenital malformations	6	5.01							.18	.15
189Aa	Febricula, simple continued, and other fevers of undetermined causation	3	2.51							.03	.03
189Ba	Under observation, undiagnosed and unknown	3	2.51							.03	.03
189Bb	Malingering										
	AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[3]										
155–163	Suicides, all						1	1	0.83		
164	Poisoning by food	3	2.51								
165a	Venomous bites and stings										
165b	Other poisoning (deleterious gases excepted)										
167	Burns (conflagrations excepted)	3	2.51								
168a	Suffocation, strangulation						1	1	.83		
169	Drowing, accidental										
170	Traumatism by firearms (other than specified)	2	1.67				1	1	.83		
170a	Shot by sentry or guard										
171	Traumatism by cutting or piercing instruments	28	23.39								
172	Traumatism by fall	73	60.99								
174	Traumatism by machines	5	4.18								
175	Traumatism by other crushing	4	3.34								
176	Injuries by animals	3	2.51								
178	Effects of excessive cold	1	.83								
179	Effects of heat										
181	Effects of electricity										
182–4	Homicides, all										
186	Other external violence	64	53.47								
155–186	Total external causes	186	155.39				3	3	2.51	6.32	5.28
	DISEASES AND INJURIES GROUPED.										
	General diseases	151	126.15		4	3.34	2	2	1.67	6.61	5.52
1–19	Epidemic diseases	49	40.94				1	1	.83	2.02	1.69
20–59	Other general diseases	102	85.21		4	3.34	1	1	.83	4.58	3.83
	Diseases of the nervous system and organs of special sense	26	21.72		2	1.67				.99	.83
60–74	Of the nervous system	19	15.87		2	1.67				.81	.68
75	Of the eye and its annexa	3	2.51							.09	.07
76	Of the ear and its annexa	4	3.34							.09	.08
77–85	Diseases of the circulatory system	10	8.35							.38	.31
86–98	Diseases of the respiratory system	35	29.24							.74	.62
99–118	Diseases of the digestive system	105	87.71				2	2	1.67	1.67	1.39
119–127	Diseases of the genito-urinary system	11	9.19							.33	.28
142–145	Diseases of the skin and cellular tissue	34	28.40							.95	.79
146–149	Diseases of the organs of locomotion	40	33.42							1.20	1.01
150	Malformations, etc.	6	5.01							.18	.15
189	Ill-defined diseases	8	6.68							.07	.06
	Total for disease	426	355.89		6	5.01	3	4	3.34	13.11	10.96
155–186	External causes	186	155.39				3	3	2.51	6.32	5.28
	Total for disease and external causes	612	511.28		6	5.01	6	7	5.85	19.44	16.24

[1] Number of discharges or deaths which actually occurred.
[3] Noneffectiveness for individual external causes not tabulated.

ratios per 1,000 of mean strength, for enlisted American troops serving in Alaska, Hawaii, year 1912—Continued.

Hawaii.									China.								
3,376.									1,097.								
Admissions.		Discharges.			Deaths.			Noneffective.	Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.
2	0.59							0.22	0.06										
17	5.04							.71	.21	7	6.38							0.16	0.14
1	.30		1	0.30				.03	.01										
1	.30		1	.30				.02	.01	1	.91							.01	.01
10	2.96		5	1.48				1.08	.32	3	2.73							.06	.06
4	1.18							.07	.02	1	.91							.005	.005
1	.30							.08	.02										
13	3.85							.55	.16	10	9.12							.82	.75
199	58.94							3.64	1.08	17	15.50							.36	.32
98	29.03							2.76	.82	11	10.03							.39	.36
15	4.44		1	.30				1.03	.31	2	1.82							.07	.07
22	6.52							1.43	.42										
3	.89							.15	.04	2	1.82							.07	.06
8	2.37							.18	.05	2	1.82							.01	.01
7	2.07							.15	.04										
1	.30							.15	.05										
															1	1	0.91		
57	16.88				1	1	0.30			1	.91								
2	.59									1	.91								
1	.30														1	1	.91		
12	3.55									2	1.82								
					3	3	.89												
8	2.37		2	.59						1	.91								
1	.30																		
65	19.25				1	1	.30			10	9.12								
232	68.72		1	.30	1	1	.30			48	43.76								
7	2.07																		
7	2.07				3	3	.89								2	2	1.82		
95	28.14		1	.30															
51	9.18									4	3.65								
1	.30																		
1	.30				1	1	.30												
343	101.60		2	.59						44	40.11								
863	255.63		6	1.78	10	10	2.96	23.21	6.88	111	101.19				4	4	3.65	2.64	2.41
703	208.23		14	4.15		2	.59	37.22	11.02	356	324.52				2	2	1.82	18.20	16.59
184	54.50							3.88	1.15	97	88.42							2.28	2.07
519	153.72		14	4.15		2	.59	33.34	9.87	259	236.10				2	2	1.82	15.92	14.51
119	35.25		17	5.03	1	1	.30	6.52	1.94	23	20.97		6	5.47				.90	.82
64	18.96		15	4.44	1	1	.30	4.79	1.42	17	15.50		6	5.47				.80	.73
32	9.48							.81	.24	4	3.65							.08	.08
23	6.81		2	.59				.93	.28	2	1.82							.01	.01
98	29.03		8	2.37				5.17	1.53	22	20.05				1	1	.91	.60	.55
184	54.50		2	.59				5.80	1.72	41	37.37							1.14	1.04
594	175.95							15.06	4.46	129	117.59				1	1	.91	2.33	2.12
30	8.89		7	2.07				1.83	.54	15	13.67							.90	.82
443	131.22							10.38	3.07	46	41.93							1.22	1.11
104	30.81		7	2.07				6.88	2.04	18	16.41							.52	.48
3	.89							.15	.04	2	1.82							.07	.06
20	5.92							.70	.21	2	1.82							.01	.01
2,298	680.69		55	16.29	1	3	.89	89.69	26.57	654	596.18		6	5.47	4	4	3.65	25.89	23.60
863	255.63		6	1.78	10	10	2.96	23.21	6.88	111	101.19				4	4	3.65	2.64	2.41
3,161	936.32		61	18.07	11	13	3.85	112.90	33.44	765	697.36		6	5.47	8	8	7.29	28.53	26.01

[2] Number of discharges or deaths including those of cases invalided home and deducted from the United States.

TABLE No. 74.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for enlisted American troops serving in Panama Canal Zone and on Army transports for the year 1912.*

International classification.	Causes of admission to sick report.	Panama Canal Zone.									Army transports.									
	Mean strength	773.									1,093.									
		Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
		Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.
1a	Paratyphoid fever									0.04	0.05										
4	Malaria	93	120.31							4.33	5.60	62	56.72							1.02	0.93
	Æstivo-autumnal fever	69	89.26							3.28	4.24	4	3.66							.17	.16
	Malarial cachexia											1	.91							.005	.005
	Quartan malarial fever	3	3.88							.13	.16	2	1.83							.04	.04
	Tertian malarial fever	21	27.17							.93	1.20	53	48.49							.78	.71
	Undetermined malarial fever											2	1.83							.02	.01
5b	Vaccinia											1	.91							.01	.01
6	Measles											18	16.47							.34	.31
10	Influenza	29	37.52							.93	1.20	36	32.94							.73	.67
14	Dysentery	5	6.47							.27	.35	3	2.74							.64	.59
	Bacillary	3	3.88							.12	.16										
	Entamœbic	2	2.59							.15	.19	3	2.74							.63	.58
	Unclassified																			.01	.01
19b	Dengue											5	4.57							.10	.09
19d	German measles											3	2.74							.06	.05
19g	Mumps	2	2.59							.07	.10	54	49.41							1.55	1.42
20	Purulent infection and septicæmia											1	.91				1	1	0.91	.01	.01
28–34	Tuberculosis, all	6	7.76		1	1.29				.70	.90	3	2.74				1			4.49	4.11
28	Tuberculosis of lungs	4	5.17		1	1.29				.46	.59	3	2.74				1			4.25	3.88
30–34	Tuberculosis of other organs	2	2.59							.24	.31									.25	.22
37–38	Venereal diseases, all	53	68.56		1	1.29				2.44	3.16	123	112.53							6.94	6.35
37	Syphilis	10	12.94		1	1.29				.76	.99	14	12.81							1.75	1.60
38a	Soft chancre	25	32.34							1.15	1.49	35	32.02							1.21	1.11
38b	Gonococcus infection	18	23.29							.53	.69	74	67.70							3.98	3.64
39–45	Cancer and other malignant tumors	1	1.29				1	1	1.29	.05	.07									.16	.14
46	Benign tumors	1	1.29							.01	.02	1	.91							.04	.04
47–48	Rheumatism, articular, all	13	16.82							.46	.59	7	6.40							.30	.28
47	Acute articular rheumatism	13	16.82							.46	.59	7	6.40							.14	.13

48	Chronic articular rheumatism																		.16	.15
50	Diabetes											1	.91						.12	.11
51	Exophthalmic goitre																		.08	.07
56	Alcoholism and results	5	6.47						.04	.05	7	6.40							.61	.64
59	Other chronic poisoning, including drug habit																		.17	.15
61a	Epidemic cerebrospinal meningitis										1	.91				1	1	.91	.01	.01
62	Locomotor ataxia																		.11	.10
63	Other diseases of spinal cord																		.09	.08
64	Cerebral hemorrhage, apoplexy																		.08	.07
66	Paralysis without specified cause																		.03	.03
67–68	Mental alienation	4	5.17	1	2	2.59			.50	.65	1	.91							3.89	3.56
69	Epilepsy				1	1.29			.08	.10	1	.91							.36	.33
73	Neuralgia and neuritis	10	12.94						.38	.49	4	3.66							.59	.54
75b	Trachoma																		.08	.07
79	Organic heart disease	2	2.59		1	1.29			.26	.33									.25	.23
80	Angina pectoris										1	.91							.005	.005
81	Diseases of the arteries, atheroma, aneurism, etc										1	.91							.04	.03
83b	Hemorrhoids	8	10.35						.40	.52	3	2.74							.05	.04
83d	Varicose veins										1	.91							.01	.01
83e	Varicocele																		.05	.04
84	Diseases of the lymphatic system	3	3.88						.17	.23	3	2.74							.13	.11
86	Diseases of the nasal fossæ	36	46.57						.26	.34	20	18.30							.19	.17
87	Diseases of the larynx										4	3.66							.08	.07
88	Diseases of the thyroid body																		.02	.01
89–90	Bronchitis	20	25.87						.23	.30	99	90.58							1.73	1.58
91	Broncho-pneumonia										3	2.74				1	1	.91	.14	.12
92	Pneumonia										6	5.49							.31	.28
93	Pleurisy	6	7.76						.57	.73	2	1.83							.14	.12
96	Asthma	2	2.59						.34	.44	3	2.74							.36	.33
99a	Diseases of the teeth and gums	4	5.17						.02	.02	4	3.66							.13	.12
99b	Other diseases of the mouth and annexa	1	1.29						.02	.02										
100	Diseases of the pharynx	52	67.27						1.45	1.87	50	45.75							.55	.50
102	Ulcer of stomach																		.02	.02
103	Other diseases of stomach (cancer excepted)	5	6.47						.07	.10	20	18.30							.31	.28
105	Diarrhea and enteritis	10	12.94						.09	.11	40	36.60							.67	.61
107	Intestinal parasites	2	2.59						.04	.06	3	2.74							.02	.02
108	Appendicitis	1	1.29						.05	.06	2	1.83							.30	.28
109	Hernia	2	2.59						.14	.18									.02	.02
110a	Diseases of the anus and fecal fistula	1	1.29						.08	.10	1	.91							.12	.11
110b	Other diseases of the intestines	11	14.23						.10	.13	54	49.41							.70	.64
113	Cirrhosis of liver																		.02	.02
115	Other diseases of liver and gall bladder	2	2.59						.43	.56	2	1.83							.17	.16
119	Acute nephritis										1	.91							.01	.01

[1] Number of discharges or deaths which actually occurred.
[2] Number of discharges or deaths including those of cases invalided home and deducted from the United States.

TABLE NO. 74.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for enlisted American troops serving in Panama Canal Zone and on Army transports for the year 1912*—Continued.

International classification.	Causes of admission to sick report.	Panama Canal Zone.									Army transports.									
	Mean strength	773.									1,093.									
		Admissions.		Discharges.			Deaths.			Noneffective.	Admissions.		Discharges.			Deaths.			Noneffective.	
		Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.[1]	Number.[2]	Ratio.	Number.	Ratio.
120	Bright's disease	1	1.29							0.08	0.10									0.10	0.09
122	Other diseases of the kidney and annexa	1	.29							.04	.05									.07	.06
124	Diseases of the bladder	4	5.17		1	1.29				.19	.25	1	0.91							.37	.34
127	Diseases of the male genital organs (nonvenereal)	3	3.88		1	1.29				.09	.12	2	1.83							.09	.08
143	Furuncle and carbuncle	10	12.94							.10	.13	7	6.40							.11	.10
144	Acute abscess and cellulitis	2	2.59							.04	.05	10	9.15							.28	.25
146	Diseases of the bones	3	3.88		1	1.29				.20	.26	1	.91							.15	.14
147	Diseases of the joints	1	1.29							.29	.37	1	.91							.30	.27
150	Congenital malformations	1	1.29							.08	.10										
189Aa	Febricula, simple continued, and other fevers of undetermined causation	1	1.29							.003	.004	1	.91							.01	.01
189Ba	Under observation, undiagnosed and unknown	1	1.29							.04	.05						1	1	0.91	.07	.06
	AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[3]																				
155–163	Suicides, all						1	1	1.29								1	1	.91		
164	Poisoning by food											1	.91				1	1	.91		
165a	Venomous bites and stings	2	2.59																		
165b	Other poisoning (deleterious gases excepted)											1	.91								
169	Drowning, accidental						2	2	2.59								1	1	.91		
170	Traumatism by firearms (other than specified)	1	1.29																		
171	Traumatism by cutting or piercing instruments	19	24.58									1	.91								
172	Traumatism by fall	55	71.15									14	12.81								

175	Traumatism by other crushing	1	1.29				1	1	1.29			1	.91							
176	Injuries by animals	3	3.88																	
179	Effects of heat	2	2.59																	
182–4	Homicides, all	1	1.29				2	2	2.59											
185	Fractures, causes not specified	1	1.29																	
186	Other external violence	35	45.28									18	16.47							
155–186	Total external causes	120	155.24				6	6	7.76	2.66	3.44	36	32.94				3	3	2.74	2.93	2.68
	DISEASES AND INJURIES GROUPED.																			
	General diseases	209	270.38		3	3.88	1	1	1.29	9.34	12.08	330	301.92				2	1	.91	17.55	16.06
1–19	Epidemic diseases	129	166.88							5.64	7.29	187	171.09							4.51	4.12
20–59	Other general diseases	80	103.49		3	3.88	1	1	1.29	3.70	4.79	143	130.83				2	1	.91	13.04	11.93
	Diseases of the nervous system and organs of special sense	38	49.16	1	3	3.88				1.86	2.40	32	29.28				1	1	.91	6.33	5.79
60–74	Of the nervous system	18	23.29	1	3	3.88				1.14	1.48	10	9.15				1	1	.91	5.33	4.88
75	Of the eye and its annexa	10	12.94							.26	.34	9	8.23							.35	.32
76	Of the ear and its annexa	10	12.94							.45	.58	13	11.89							.64	.59
77–85	Diseases of the circulatory system	14	18.11		1	1.29				.84	1.09	9	8.23							.62	.57
86–98	Diseases of the respiratory system	64	82.80							1.40	1.81	137	125.34				1	1	.91	2.96	2.70
99–118	Diseases of the digestive system	91	117.72							2.49	3.22	177	161.94							3.09	2.82
119–127	Diseases of the genito-urinary system	9	11.64		2	2.59				.40	.52	4	3.66							.64	.59
142–145	Diseases of the skin and cellular tissue	46	59.51							1.10	1.42	29	26.53							.70	.64
146–149	Diseases of the organs of locomotion	22	28.46		3	3.88				1.24	1.61	9	8.23							.93	.85
150	Malformations, etc	1	1.29							.08	.10										
189	Ill-defined diseases	2	2.59							.04	.06	40	36.60				1	1	.91	.54	.49
	Total for disease	496	641.66	1	12	15.52	1	1	1.29	18.78	24.30	767	701.74				5	4	3.66	33.35	30.51
155–186	External causes	120	155.24				6	6	7.76	2.66	3.44	36	32.94				3	3	2.74	2.93	2.68
	Total for disease and external causes	616	796.90	1	12	15.52	7	7	9.06	21.44	27.74	803	734.67				8	7	6.40	36.29	33.20

[1] Number of discharges or deaths which actually occurred.
[2] Number of discharges or deaths including those of cases invalided home and deducted from the United States.
[3] Noneffectiveness for individual external causes not tabulated.

TABLE NO. 75.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for Porto Rican native troops and Philippine Scouts, enlisted men, for the year 1912.*

International classification.	Causes of admission to sick report.	Porto Rican native troops.								Philippine Scouts.							
	Mean strength	588.								S. G. O. 5407.				A. G. O. 5493.			
		Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
		Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
1	Typhoid fever									3	0.56			1	0.18	0.54	0.10
4	Malaria	31	52.72					0.48	0.50	1,308	241.91			3	.55	22.67	4.19
	Æstivo-autumnal fever	1	1.70					.02	.02	252	46.61			2	.36	5.69	1.05
	Malarial cachexia									1	.18					.04	.01
	Quartan malarial fever									4	.74					.05	.01
	Tertian malarial fever	29	49.32					.45	.47	1,026	189.76			1	.18	16.40	3.03
	Undetermined malarial fever	1	1.70					.01	.01	25	4.62					.49	.09
5	Smallpox and varioloid	1	1.70					.05	.05	2	.37					.07	.01
5b	Vaccinia	5	8.50					.19	.20	4	.74					.03	.01
6	Measles									17	3.14					.81	.15
10	Influenza	8	13.60					.05	.05	2	.37					.09	.02
14	Dysentery	20	34.01					.60	.64	38	7.03					2.06	.38
	Bacillary	6	10.20					.33	.35	8	1.48					.33	.06
	Entamebic	14	23.81					.27	.29	24	4.44					1.55	.29
	Unclassified									6	1.11					.17	.03
18	Erysipelas									2	.37	1	0.18			.72	.13
19b	Dengue									125	23.12					1.78	.33
19d	German measles	1	1.70					.05	.05								
19g	Mumps	11	18.71					.35	.37	16	2.96					.78	.14
20	Purulent infection and septicemia									1	.18			1	.18	.01	.002
25	Mycosis									1	.18					.05	.01
27	Beriberi									2	.37					.27	.05
28–34	Tuberculosis, all	2	3.40					.22	.23	32	5.92	23	4.19	4	.73	4.92	.91
28	Tuberculosis of lungs	1	1.70					.09	.10	26	4.81	22	4.01			3.73	.69
29	Miliary tuberculosis, acute	1	1.70					.13	.14								
30–34	Tuberculosis of other organs									6	1.11	1	.18	4	.73	1.18	.22
37–38	Venereal diseases, all	62	105.44	1	1.70			5.63	5.96	301	55.67	2	.36			20.26	3.75
37	Syphilis	10	17.01					1.07	1.13	28	5.18					2.75	.51
38a	Soft chancre	34	57.82					3.18	3.36	48	8.88					3.20	.59
38b	Gonococcus infection	18	30.61	1	1.70			1.38	1.46	225	41.61	2	.36			14.31	2.65
39–45	Cancer and other malignant tumors									3	.56	1	.18	1	.18	.62	.12
46	Benign tumors	1	1.70					.01	.01	7	1.29					.23	.04
47–48	Rheumatism, articular all	7	11.90					.39	.41	26	4.81					1.45	.27

48	Chronic articular rheumatism	1	1.70					.02	.02	2	.37					.42	.08
56	Alcoholism and results	1	1.70					.02	.02	2	.37					.01	.003
63	Other diseases of spinal cord									1	.18					.21	.04
64	Cerebral hemorrhage, apoplexy									1	.18			1	.18	.01	.001
66	Paralysis without specified cause									2	.37					.31	.06
67–68	Mental alienation	1	1.70	1	1.70			.07	.08	5	.92	5	.91			1.13	.21
69	Epilepsy									2	.37					.05	.01
73	Neuralgia and neuritis	3	5.10					.02	.02	6	1.11	1	.18			.25	.05
79	Organic heart disease									3	.56					.18	.03
82	Embolism and thrombosis									1	.18					.09	.02
83b	Hemorrhoids	3	5.10					.09	.09	2	.37					.03	.01
83d	Varicose veins									1	.18					.06	.01
84	Diseases of the lymphatic system	34	57.82					.80	.85	30	5.55					1.53	.28
86	Diseases of the nasal fossæ	19	32.31					.20	.21	21	3.88					.34	.06
87	Diseases of the larynx	1	1.70					.01	.01	6	1.11					.20	.04
89–90	Bronchitis	6	10.20					.08	.08	153	28.30					4.12	.76
91	Broncho-pneumonia									4	.74					.26	.05
92	Pneumonia	1	1.70					.04	.05	10	1.85			2	.36	.48	.09
93	Pleurisy									3	.56					.38	.07
94	Pulmonary congestion and pulmonary apoplexy									1	.18					.01	.002
96	Asthma	4	6.80					.03	.03	2	.37					.01	.003
98a	Hemoptysis									2	.37					.08	.01
99a	Diseases of the teeth and gums	6	10.20					.06	.07	45	8.32	1	.18			.86	.16
99b	Other diseases of the mouth and annexa	1	1.70					.01	.01	1	.18					.003	.001
100	Diseases of the pharynx	11	18.71					.11	.11	29	5.36					.44	.08
103	Other diseases of stomach (cancer excepted)	2	3.40					.01	.01	52	9.62					.96	.18
105	Diarrhea and enteritis	66	112.24					.73	.77	102	18.86					1.43	.26
107	Intestinal parasites	41	69.73					.71	.75	35	6.47			1	.18	.76	.14
108	Appendicitis	1	1.70					.04	.04	9	1.66					1.10	.20
109	Hernia	1	1.70					.12	.13	2	.37					.14	.03
110a	Diseases of the anus and fecal fistula	1	1.70					.01	.01	3	.56	1	.18			.54	.10
110b	Other diseases of the intestines	12	20.41					.12	.13	273	50.49					3.51	.65
115	Other diseases of liver and gall bladder	1	1.70					.05	.06	6	1.11			1	.18	.17	.03
120	Bright's disease									2	.37			1	.18	.19	.03
122	Other diseases of the kidney and annexa	1	1.70					.01	.01								
124	Diseases of the bladder	1	1.70					.02	.02	1	.18					.01	.002
125	Diseases of the urethra, urinary abscess, etc	1	1.70					.05	.05	1	.18					.08	.02
126	Diseases of the prostate	1	1.70					.01	.01								
127	Diseases of the male genital organs (nonvenereal)	26	44.22					.65	.69	15	2.77					.55	.10
143	Furuncle and carbuncle	39	66.33					.46	.48	113	20.90					2.58	.48
144	Acute abscess and cellulitis	36	61.22					.86	.91	90	16.64					2.78	.51
146	Diseases of the bones									5	.92					.49	.09
147	Diseases of the joints	2	3.40					.26	.27	2	.37					.14	.03
150	Congenital malformations	6	10.20					.21	.22	3	.56					.08	.02

TABLE NO. 75.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for Porto Rican native troops and Philippine scouts, enlisted men, for the year 1912*—Continued.

International classification.	Causes of admission to sick report.	Porto Rican native troops.								Philippine Scouts.							
	Mean strength	588.								S. G. O. 5407.				A. G. O. 5493.			
		Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
		Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
189Aa	Febricula, simple continued, and other fevers of undetermined causation	8	13.61					0.51	0.54	56	10.36					1.04	0.19
189Ba	Under observation, undiagnosed and unknown	78	132.65					.003	.003	4	.74			1	0.18	.45	.08
	AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[1]																
155–163	Suicides, all													1	.18		
164	Poisoning by food	2	3.40			1	1.70			5	.92						
165a	Venomous bites and stings									8	1.48						
165b	Other poisoning (deleterious gases excepted)									16	2.96			1	.18		
167	Burns (conflagrations excepted)									4	.74						
168a	Suffocation, strangulation									1	.18						
170	Traumatism by firearms (other than specified)	1	1.70							11	2.03						
170a	Shot by sentry or guard									1	.18						
171	Traumatism by cutting or piercing instruments	7	11.90							36	6.66						
172	Traumatism by fall	25	42.51			1	1.70			77	14.24						
175	Traumatism by other crushing									3	.56	1	0.18				
176	Injuries by animals									3	.56						
179	Effects of heat	2	3.40							6	1.11						
182–4	Homicides, all													1	.18		
186	Other external violence	25	42.51							146	27.00			1	.18		
	Killed or wounded in action:																
	By bullet									4	.74	3	.55	2	.36		
	By bolo, kris, etc									7	1.29	3	.55	1	.18		
	By other weapon									2	.37						
155–186	Total external causes	62	105.44			2	3.40	1.09	1.15	330	61.04	7	1.27	7	1.27	12.97	2.40

	General diseases	155	263.61	2	3.40	.....	.....	8.27	8.76	1,929	356.76	27	4.92	10	1.82	58.11	10.75
1–19	Epidemic diseases	80	136.05	.....	.....	.....	.....	1.80	1.91	1,553	287.22	1	.18	4	.73	30.16	5.58
20–59	Other general diseases	75	127.55	2	3.40	.....	.....	6.47	6.85	376	69.54	26	4.73	6	1.09	27.96	5.17
	Diseases of the nervous system and organs of special sense	19	32.31	2	3.40	.....	.....	.46	.49	102	18.86	8	1.45	1	.18	4.64	.86
60–74	Of the nervous system	4	6.80	1	1.70	.....	.....	.09	.10	20	3.70	7	1.27	1	.18	2.08	.38
75	Of the eye and its annexa	11	18.71	1	1.70	.....	.....	.27	.29	64	11.84	1	.18	.....	.....	1.98	.37
76	Of the ear and its annexa	4	6.80	.....	.....	.....	.....	.10	.10	18	3.33	.....	.....	.....	.....	.57	.11
77–85	Diseases of the circulatory system	38	64.63	.....	.....	.....	.....	.90	.95	39	7.21	.....	.....	.....	.....	1.97	.36
86–98	Diseases of the respiratory system	31	52.72	.....	.....	.....	.....	.37	.39	206	38.10	.....	.....	2	.36	5.99	1.11
99–118	Diseases of the digestive system	143	243.20	.....	.....	.....	.....	1.97	2.09	558	103.20	2	.36	2	.36	9.91	1.84
119–127	Diseases of the genito-urinary system	30	51.02	.....	.....	.....	.....	.73	.78	19	3.51	.....	.....	1	.18	.83	.15
142–145	Diseases of the skin and cellular tissue	90	153.06	.....	.....	.....	.....	1.61	1.71	373	68.99	.....	.....	.....	.....	11.71	2.17
146–149	Diseases of the organs of locomotion	12	20.41	.....	.....	.....	.....	.38	.40	47	8.69	1	.18	.....	.....	2.07	.38
150	Malformations, etc	6	10.20	.....	.....	.....	.....	.21	.22	3	.56	.....	.....	.....	.....	.08	.02
189	Ill-defined diseases	86	146.26	.....	.....	.....	.....	.51	.54	61	11.28	.....	.....	1	.18	1.53	.28
	Total for disease	610	1,037.41	4	6.80	.....	.....	15.42	16.32	3,337	617.16	38	6.92	17	3.09	96.89	17.92
155–186	External causes	62	105.44	.....	.....	2	3.40	1.09	1.15	330	61.04	7	1.27	7	1.27	12.97	2.40
	Total for diseases and external causes	672	1,142.86	4	6.80	2	3.40	16.51	17.47	3,667	678.20	45	8.19	24	4.37	109.86	20.32

[1] Noneffectiveness for individual external causes not tabulated.

TABLE No. 76.—*Admissions to sick report, discharges, deaths, and noneffectiveness, ex- at home stations, placed in comparison with the same*

International classification.	Causes of admissions to sick report.	United States (at home).				Alaska.				Philippine Islands.			
		Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
1	Typhoid fever	0.26	.....	0.03	0.05	.....	.....	.....	.....	0.40	.....	.....	0.09
1a	Paratyphoid fever	.05	.....	.....	.01	.....	.....	.....	.....	.08	.....	.....	.....
4	Malaria	14.22	.....	.....	.30	5.01	.....	.....	0.10	171.00	.....	0.32	3.51
	Estivo-autumnal fever	.96	.....	.....	.03	.....	.....	.....	.....	46.29	.....	.32	1.23
	Malarial cachexia	.14	.....	.....	.01	.....	.....	.....	.....	.40	.....	.....	.04
	Quartan malarial fever	.12	.....	.....	.....	.....	.....	.....	.....	.89	.....	.....	.02
	Tertian malarial fever	12.30	.....	.....	.24	5.01	.....	.....	.10	118.15	.....	.....	2.12
	Undetermined malarial fever	.70	.....	.....	.01	.....	.....	.....	.....	5.26	.....	.....	.10
5	Smallpox and varioloid	.10	.....	.....	.01	.....	.....	.....	.....	.....	.....	.....	.....
5b	Vaccinia	12.85	.....	.....	.13	.....	.....	.....	.....	1.05	.....	.....	.02
6	Measles	7.30	0.10	.20	.43	21.72	.....	0.83	1.07	2.75	.....	.....	.24
7	Scarlet fever	.24	.....	.....	.02	.....	.....	.....	.....	.....	.....	.....	.....
9	Diphtheria	1.30	.....	.....	.07	.....	.....	.....	.....	.16	.....	.....	.02
10	Influenza	16.65	.....	.....	.26	5.85	.....	.....	.09	3.32	.....	.....	.06
13	Cholera nostras	.05	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
14	Dysentery	1.78	.10	.02	.15	.....	.....	.....	.....	16.91	0.08	.08	1.12
	Bacillary	.29	.02	.....	.02	.....	.....	.....	.....	.89	.....	.....	.04
	Entamebic	.93	.08	.02	.10	.....	.....	.....	.....	13.51	.08	.08	1.00
	Unclassified	.57	.....	.....	.02	.....	.....	.....	.....	2.51	.....	.....	.09
18	Erysipelas	.41	.....	.....	.02	.83	.....	.....	.02	.16	.....	.....	.....
19b	Dengue	.21	.....	.....	.....	.....	.....	.....	.....	108.93	.....	.....	1.90
19d	German measles	3.87	.....	.....	.09	.....	.....	.....	.....	.08	.....	.....	.....
19e	Hemoglobinuric fever	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.01
19g	Mumps	19.17	.02	.....	.82	6.68	.....	.....	.38	9.79	.....	.....	.76
20	Purulent infection and septicemia	.07	.02	.03	.02	.....	.....	.....	.....	.08	.....	.08	.....
25	Mycoses	.05	.....	.....	.....	.....	.....	.....	.....	.49	.....	.....	.03
28–34	Tuberculosis, all	3.25	1.67	.27	1.65	4.18	.....	.83	.38	5.02	1.46	.57	.53
28	Tuberculosis of lungs	2.88	1.57	.22	1.57	3.34	.....	.83	.34	4.61	1.38	.49	.43
29	Miliary tuberculosis, acute	.05	.....	.05	.....	.....	.....	.....	.....	.....	.....	.....	.....
30–34	Tuberculosis of other organs	.33	.10	.....	.08	.83	.....	.....	.04	.40	.08	.08	.08
36	Scoliosis (rickets)	.03	.03	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
37–38	Venereal diseases, all	115.74	1.26	.05	5.96	41.77	0.83	.....	2.59	249.17	1.13	.24	16.53
37	Syphilis	25.58	.62	.03	1.70	7.52	.83	.....	.97	42.73	.40	.24	3.08
38a	Soft chancre	20.09	.03	.....	1.01	3.34	.....	.....	.26	67.33	.....	.....	4.33
38b	Gonococcus infection	70.07	.60	.02	3.26	30.91	.....	.....	1.36	139.11	.73	.....	9.13
39–45	Cancer and other malignant tumors	.22	.03	.10	.05	.....	.....	.....	.....	.16	.....	.08	.03
46	Benign tumors	1.52	.02	.....	.05	1.67	.....	.....	.02	.97	.....	.....	.04
47–48	Rheumatism, articular, all	9.78	.28	.05	.66	6.68	.83	.....	.18	6.47	.08	.08	.43
47	Acute articular rheumatism	8.31	.02	.05	.45	5.85	.....	.....	.10	4.86	.....	.08	.23
48	Chronic articular rheumatism	1.47	.27	.....	.21	.83	.83	.....	.08	1.62	.08	.....	.13
50	Diabetes	.17	.07	.02	.02	.83	.83	.....	.09	.16	.08	.....	.03
51	Exophthalmic goitre	.21	.10	.....	.03	.....	.....	.....	.....	.16	.08	.....	.03
56	Alcoholism and results	16.67	.37	.15	.29	30.07	.83	.....	.57	21.20	.24	.24	.33
57–58	Chronic occupational poisoning	.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
59	Other chronic poisoning, including drug habit	.43	.08	.02	.03	.....	.....	.....	.....	.16	.16	.....	.03
60	Encephalitis	.02	.....	.02	.....	.....	.....	.....	.....	.....	.....	.....	.....
61	Simple meningitis	.03	.....	.03	.....	.....	.....	.....	.....	.....	.....	.....	.....
61a	Epidemic cerebrospinal meningitis	.17	.....	.07	.01	.....	.....	.....	.....	.16	.....	.08	.03
62	Locomotor ataxia	.07	.05	.....	.03	.....	.....	.....	.....	.16	.08	.....	.03
63	Other diseases of spinal cord	.17	.10	.....	.04	.....	.....	.....	.....	.....	.....	.....	.....
64	Cerebral hemorrhage, apoplexy	.09	.02	.05	.02	.....	.....	.....	.....	.....	.08	.....	.....
66	Paralysis without specified cause	.34	.03	.....	.04	.....	.....	.....	.....	.16	.08	.....	.03
67–68	Mental alienation	3.26	2.78	.03	.85	6.68	.83	.....	.27	3.56	2.19	.....	.33
69	Epilepsy	1.30	.42	.....	.13	.....	.....	.....	.....	.65	.24	.....	.03
73	Neuralgia and neuritis	5.21	.27	.....	.26	5.01	.83	.....	.24	8.25	.16	.....	.33
75a	Follicular conjuctivitis	.15	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
75b	Trachoma	.39	.05	.....	.02	.....	.....	.....	.....	.16	.....	.....	.....
77	Pericarditis	.05	.....	.....	.....	.83	.....	.....	.02	.24	.....	.....	.03
78	Acute endocarditis	.10	.02	.....	.01	.....	.....	.....	.....	.....	.....	.....	.03
79	Organic heart disease	1.64	.74	.20	.23	2.51	.....	.....	.10	1.05	.08	.16	.03
80	Angina pectoris	.26	.02	.02	.02	.....	.....	.....	.....	.08	.....	.08	.....
81	Diseases of the arteries, atheroma, aneurism, etc	.22	.02	.07	.03	.....	.....	.....	.....	.24	.....	.08	.03

pressed in ratios per 1,000 of mean strength, for American troops (enlisted men) on duty data for those serving at distant stations for the year 1912.

Hawaii.				Canal Zone, Panama.				China.				Transports.				Total American Army.			
Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
0.30	....	....	0.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.27	.....	0.03	0.05
.....	.....	.....	.....	.....	.....	.....	0.05	.....	.....	.....	.....	.....	.....	.....	.....	.05	.....	.....	.01
6.22	.....	.....	.15	120.31	.....	....	5.60	5.47	.....	....	0.08	56.72	.....	....	0.93	40.00	.....	.05	.85
.....	.....	.....	.....	89.26	.....	....	4.24	.91	.....	.....	.01	3.66	.....	....	.16	8.97	.....	.05	.26
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.91	.....	.....	.....	.18	.....	.....	.02
.....	.....	.....	.....	3.88	.....	....	.16	.91	.....	.....	.02	1.83	.....	....	.04	.31	.....	.....	.01
6.22	.....	.....	.15	27.17	.....	....	1.20	3.65	.....	.....	.04	48.49	.....	.....	.71	29.17	.....	....	.54
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1.83	.....	....	.01	1.38	.....	.....	.02
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.08	.....	.....	.01
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.91	.....	....	.01	9.76	.....	.....	.10
.....	.....	.....	.....	.....	.....	.....	.....	3.65	.....	.....	.20	16.47	.....	....	.31	6.49	0.08	.16	.38
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.18	.....	.....	.01
.....	.....	.....	.....	.....	.....	.....	.....	.91	.....	.....	.04	.....	.....	.....	.....	1.01	.....	.....	.06
38.51	.....	.....	.62	37.52	.....	....	1.20	42.84	.....	.....	.54	32.94	.....	....	.67	16.12	.....	.....	.26
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.04	.....	.....	.....
1.48	.....	.....	.08	6.47	.....	....	.35	10.03	.....	.....	.44	2.74	.....	....	.59	4.31	.09	.03	.31
.....	.....	.....	.....	3.88	.....	....	.16	3.65	.....	.....	.11	.....	.....	.....	.....	.45	.01	.....	.02
1.48	.....	.....	.08	2.59	.....	....	.19	3.65	.....	.....	.27	2.74	.....	....	.58	3.00	.08	.03	.25
.....	.....	.....	.....	.....	.....	.....	.....	2.73	.....	.....	.06	.....	.....	.....	.01	.86	.....	.....	.03
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.34	.....	.....	.02
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	4.57	.....	....	.09	17.41	.....	.....	.30
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2.74	.....	....	.05	2.94	.....	.....	.07
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.44	.....	.....	.24	2.59	.....	....	.10	10.03	.....	.....	.49	49.41	.....	....	1.42	16.99	.01	.....	.77
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.91	....	0.91	.01	.08	.01	.05	.02
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.11	.....	.....	.01
2.07	1.48	0.30	.33	7.76	1.29	....	.90	.....	.....	.....	.....	2.74	.....	....	4.11	3.49	1.56	.31	1.40
1.48	1.18	.30	.12	5.17	1.29	....	.59	.....	.....	.....	.....	2.74	.....	....	3.88	3.08	1.46	.26	1.31
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.04	.....	.04	.....
.59	.30	....	.21	2.59	.....	....	.31	.....	.....	.....	.....	.....	.....	.....	.22	.37	.10	.01	.09
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.03	.03	.....	.....
22.93	2.67	.30	8.69	68.56	1.29	....	3.16	203.28	....	0.91	13.55	112.53	.....	....	6.35	136.70	1.26	.10	7.78
10.88	1.18	.30	3.17	12.94	1.29	....	.99	29.17	.....	.....	2.39	12.81	.....	....	1.60	28.42	.60	.08	1.97
26.36	.....	.....	1.58	32.34	.....	....	1.49	99.36	.....	.91	7.24	32.02	.....	....	1.11	28.96	.03	.01	1.64
55.69	1.48	....	3.93	23.29	.....	....	.69	74.75	.....	.....	3.93	67.70	.....	....	3.64	79.32	.63	.01	4.17
.30	.....	.....	.01	1.29	.....	1.29	.07	.....	.....	.....	.....	.....	.....	.....	.14	.22	.03	.10	.05
4.74	.....	.....	.21	1.29	.....	....	.02	2.73	.....	.....	.05	.91	.....	....	.04	1.58	.01	.....	.05
6.81	.....	.....	.49	16.82	.....	....	.59	7.29	.....	.91	.66	6.40	.....	....	.28	9.11	.24	.06	.59
5.03	.....	.....	.27	16.82	.....	....	.59	2.73	.....	.91	.66	6.40	.....	....	.13	7.63	.01	.06	.40
1.78	.....	.....	.22	.....	.....	.....	.....	4.56	.....	.....	.....	.....	.....	.....	.15	1.48	.23	.....	.19
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.91	.....	....	.11	.18	.08	.01	.02
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.07	.18	.09	.....	.03
5.40	.....	.....	.12	6.47	.....	....	.05	22.79	.....	.....	.25	.40	.....	....	.64	17.38	.33	.15	.30
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.01	.....	.....	.....
1.48	.....	.....	.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.15	.41	.09	.01	.03
.30	.....	.30	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.03	.....	.03	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.03	.....	.03	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.91	.....	.91	.01	.17	.....	.08	.01
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.10	.08	.05	.....	.03
.30	.....	.....	.03	.....	.....	.....	.....	.91	0.91	.....	.03	.....	.....	.....	.08	.15	.09	.....	.03
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.07	.06	.03	.04	.02
.30	.....	.....	.04	.....	.....	.....	.....	.91	.....	.....	.11	.....	.....	.....	.03	.32	.04	.....	.04
5.04	2.96	.....	.40	5.17	2.59	.....	.65	5.47	3.65	.....	.43	.91	.....	.....	3.56	3.45	2.64	.03	.77
1.48	.59	.....	.11	.....	1.29	.....	.10	.91	.91	.....	.04	.91	.....	.....	.33	1.16	.40	.....	.11
2.96	.59	.....	.23	12.94	.....	.....	.49	3.65	.....	.....	.02	3.66	.....	.....	.54	5.62	.26	.....	.28
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.11	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.07	.32	.04	.....	.02
.30	.....	.....	.03	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.10	.....	.....	.01
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.08	.01	.....	.01
3.26	1.48	.....	.26	2.59	1.29	.....	.33	.91	.....	.....	.01	.....	.....	.....	.23	1.61	.64	.18	.20
.....	.....	.....	.....	.....	.....	.....	.....	.91	.....	.91	.....	.91	.....	.....	.....	.23	.01	.04	.01
.....	.....	.....	.....	.....	.....	.....	.....	.91	.....	.....	.03	.91	.....	.....	.03	.23	.01	.06	.03

TABLE No. 76.—*Admissions to sick report, discharges, deaths, and noneffectiveness, ex- at home stations, placed in comparison with the same data*

International classification.	Causes of admissions to sick report.	United States (at home).				Alaska.				Philippine Islands.			
		Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
82	Embolism and thrombosis	0.02		0.02									
83b	Hemorrhoids	5.64	0.02		0.17	4.18			0.15	8.74			0.29
83d	Varicose veins	.86			.06					.57			.04
83e	Varicocele	1.90	.02		.11					4.21			.24
84	Diseases of the lymphatic system	4.66			.24	.83			.04	10.68			.69
86	Diseases of the nasal fosse	13.26	.03		.17	5.85			.04	11.09			.22
87	Diseases of the larynx	3.58			.06	5.85			.06	.89			.01
88	Diseases of the thyroid body	.14	.02	.02	.01					.24	0.08		.01
89–90	Bronchitis	38.24	.12		.80	14.20			.28	21.77			.58
91	Broncho-pneumonia	.48		.07	.05				.05	.24			.06
92	Pneumonia	2.38	.03	.20	.18	1.67			.06	1.46			.17
93	Pleurisy	3.41	.03		.24	.83			.01	2.67			.22
94	Pulmonary congestion and pulmonary apoplexy	.39		.03									
96	Asthma	.79	.03		.06	.83			.12	1.05	.32		.04
98a	Hemoptysis	.10											
98b	Hay fever	.07											
99a	Diseases of the teeth and gums	5.22			.08	8.35			.12	11.09			.24
99b	Other diseases of the mouth and annexa	.74	.02		.03	.83				.89			.02
100	Diseases of the pharynx	74.45			1.05	28.40			.38	34.47			.60
102	Ulcer of the stomach	.10	.05	.02	.02					.24			.03
103	Other diseases of stomach (cancer excepted)	11.79	.02		.20	16.71			.22	20.23		0.08	.46
105	Diarrhea and enteritis	23.66	.03	.02	.32	10.86		0.83	.12	60.69	.08		1.05
107	Intestinal parasites	2.38			.05	1.67			.02	1.94			.04
108	Appendicitis	6.85		.07	.52	6.68			.34	5.66		.24	.59
109	Hernia	4.20	.37		.45	1.67			.03	3.40			.42
110a	Diseases of the anus and fecal fistula	.63	.03		.05					1.54			.12
110b	Other diseases of the intestines	22.00	.03	.02	.29	10.86			.10	49.85			.65
113	Cirrhosis of liver	.07		.02	.01			.83					
114	Biliary calculi	.24		.02	.02					.24			.01
115	Other diseases of liver and gall bladder	3.10			.17	1.67			.06	5.10		.32	.34
117	Simple peritonitis	.05	.02	.03									
119	Acute nephritis	.46		.10	.03								
120	Bright's disease	.62	.23	.10	.12					.73	.08	.16	.06
122	Other diseases of the kidney and annexa	.34	.05		.03					.32			.01
124	Diseases of the bladder	2.79	.35		.17	.83			.01	2.27	.24		.10
125	Diseases of the urethra, urinary abscess, etc	1.37			.02					1.62			.04
126	Diseases of the prostate	.03								.16			.03
127	Diseases of the male genital organs (nonvenereal)	5.89	.02		.17	8.35			.26	5.58			.36
143	Furuncle and carbuncle	13.96			.24	8.35			.21	35.61			.88
144	Acute abscess and cellulitis	10.23			.26	9.19			.12	26.30			.74
146	Diseases of the bones	1.87	.12		.16	1.67			.10	2.02			.14
147	Diseases of the joints	3.22	.20		.23	5.01			.37	3.32	.24		.24
150	Congenital malformations	3.94	.02		.12	5.01			.15	3.64			.12
189Aa	Febricula, simple continued, and other fevers of undetermined causation	1.94			.04	2.51			.03	15.46			.24
189Ba	Under observation, undiagnosed and unknown	2.14	.02	.02	.15	2.51			.03	1.13			.04
189Bb	Malingering	.51			.02					.24			.04
	AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[1]												
155–163	Suicides, all	.31		.79				.83		.16		.24	
164	Poisoning by food	1.01				2.51				13.92			
165a	Venomous bites and stings	.91								2.19			
165b	Other poisoning (deleterious gases excepted)	.43		.10						.16			
166	Conflagration	.03											

[1] Noneffectiveness for individual external causes not tabulated.

ressed in ratios per 1,000 of mean strength, for American troops (enlisted men) on duty or those serving at distant stations for the year 1912—Continued.

Hawaii.				Canal Zone, Panama.				China.				Transports.				Total American Army.			
Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
																0.01		0.01	
6.22			0.19	10.35			0.52	6.38			0.14	2.74			0.04	6.15	0.01		0.19
.30			.04									.91			.01	.75			.05
4.44	0.59		.44					2.73			.04				.04	2.31	.04		.14
0.07			.34	3.88			.23	8.20			.32	2.74			.11	5.80			.31
5.47	.30		.56	46.57			.34	4.56			.01	18.30			.17	13.61	.04		.19
1.78			.03					3.65			.03	3.66			.07	3.08			.05
.30			.05												.01	.15	.03	.01	.01
2.51	.30		.69	25.87			.30	16.41			.26	90.58			1.58	34.89	.10		.75
												2.74		0.91	.12	.43		.06	.05
.59			.05					10.03			.57	5.49			.28	2.27	.03	.15	.18
2.96			.25	7.76			.73	.91			.12	1.83			.12	3.22	.03		.23
																.29		.03	
.59			.06	2.59			.44					2.74			.33	.86	.08		.06
								1.82			.04					.10			
																.05			
1.10			.68	5.17			.02					3.66			.12	7.22			.13
1.48			.03	1.29			.02									.78	.01		.03
0.35			.91	67.27			1.87	31.91			.46	45.75			.50	65.33			.95
															.02	.11	.04	.01	.02
2.44			.44	6.47			.10	13.67			.12	18.30			.28	13.29	.01	.01	.25
4.14			.60	12.94			.11	33.73			.34	36.60			.61	30.41	.04	.03	.45
1.18			.01	2.59			.06	4.56			.05	2.74			.02	2.29			.04
7.70			.65	1.29			.06	8.20		0.91	.31	1.83			.28	6.59		.10	.52
1.48			.26	2.59			.18	2.73			.23				.02	3.82	.28		.41
1.18			.09	1.29			.10	6.38			.35	.91			.11	.88	.03		.07
3.96			.47	14.23			.13	10.03			.11	49.41			.64	26.23	.03	.01	.35
.30			.03												.02	.06		.03	.01
.59			.06													.24		.01	.02
5.04			.21	2.59			.56	6.38			.14	1.83			.16	3.50		.05	.20
																.04	.01	.03	
												.91			.01	.36		.08	.02
.30	.30		.01	1.29			.10								.09	.60	.20	.10	.10
.30	.30		.01	1.29			.05	.91			.01				.06	.31	.05		.02
2.96	1.48		.32	5.17	1.29		.25	2.73			.06	.91			.34	2.68	.38		.16
.18			.02					.91								1.34			.03
.30			.02													.06			
.85			.16	3.88	1.29		.12	9.12			.75	1.83			.08	5.76	.03		.20
.94			1.08	12.94			.13	15.50			.32	6.40			.10	19.14			.37
.03			.82	2.59			.05	10.03			.36	9.15			.25	13.47			.36
.44	.30		.31	3.88	1.29		.26	1.82			.07	.91			.14	2.01	.11		.17
.52			.42	1.29			.37					.91			.27	3.31	.19		.24
.89			.04	1.29			.10	1.82			.06					3.67	.01		.12
.37			.05	1.29				1.82			.01	.91			.01	4.08			.07
.07			.04	1.29			.05							.91	.06	1.92	.01	.03	.12
.30			.05													.43			.02
						1.29				.91				.91		.26		.68	
.88		0.30						.91				.91		.91		3.74		.03	
.59				2.59				.91								1.09			
.30										.91		.91				.37		.09	
																.03			

TABLE No. 76.—*Admissions to sick report, discharges, deaths, and noneffectiveness, ex- at home stations, placed in comparison with the same data*

International classification.	Causes of admissions to sick report.	United States (at home).				Alaska.				Philippine Islands.			
		Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
	AFFECTIONS PRODUCED BY EXTERNAL CAUSES—contd.												
167	Burns (conflagrations excepted)	2.76	.....	.....	.....	2.51	.....	.....	.....	1.45	.....	.....	.....
168	Absorption of deleterious gases	.05	.....	0.03	.....	.....	.....	.....	.....	.08	.....	.....	.....
168a	Suffocation, strangulation	.....	.....	.....	.....	.....	.....	0.83	.....	.....	.....	.....	.....
169	Drowning, accidental	.....	.....	.40	.....	.....	.....	.....	.....	.....	.....	1.05	.....
170	Traumatism by firearms (other than specified)	2.07	0.20	.12	.....	1.67	.....	.83	.....	2.02	0.80	.24	.....
170a	Shot by sentry or guard	.10	.....	.05	.....	.....	.....	.....	.....	.08	.....	.08	.....
171	Traumatism by cutting or piercing instruments	10.57	.10	.02	.....	23.39	.....	.....	.....	16.26	.16	.....	.....
172	Traumatism by fall	47.47	.28	.17	.....	60.99	.....	.....	.....	47.10	.49	.24	.....
174	Traumatism by machines	1.25	.05	.02	.....	4.18	.....	.....	.....	.65	.....	.....	.....
175	Traumatism by other crushing	2.00	.08	.30	.....	3.34	.....	.....	.....	2.10	.24	.16	.....
176	Injuries by animals	14.24	.08	.....	.....	2.51	.....	.....	.....	17.48	.....	.....	.....
178	Effects of excessive cold	.75	.03	.....	.....	.83	.....	.....	.....	.....	.....	.....	.....
179	Effects of heat	1.44	.....	.02	.....	.....	.....	.....	.....	4.21	.....	.....	.....
180	Effects of lightning	.09	.....	.03	.....	.....	.....	.....	.....	.....	.....	.....	.....
181	Effects of electricity	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
182-4	Homicides, all	.10	.....	.22	.....	.....	.....	.....	.....	.....	.....	.32	.....
185	Fractures, causes not specified	.12	.....	.02	.....	.....	.....	.....	.....	.....	.....	.....	.....
186	Other external violence	56.05	.44	.....	.....	53.47	.....	.....	.....	63.69	.32	.08	.....
	Killed or wounded in action	.....	.....	.....	.....	.....	.....	.....	.....	.16	.....	.....	.....
	By bullet	.....	.....	.....	.....	.....	.....	.....	.....	.08	.....	.....	.....
	By bolo, kris, etc	.....	.....	.....	.....	.....	.....	.....	.....	.08	.....	.....	.....
155-186	Total for external causes	141.76	1.29	2.28	4.58	155.39	....	2.51	5.28	171.64	1.29	2.43	4.89
	DISEASES AND INJURIES GROUPED.												
	General diseases	233.65	4.22	.99	11.28	126.15	3.34	1.67	5.52	603.54	3.40	1.62	25.73
1-19	Epidemic diseases	85.04	.22	.25	2.45	40.94	....	.83	1.69	318.93	.08	.40	7.77
20-59	Other general diseases	148.61	4.00	.74	8.83	85.21	3.34	.83	3.83	284.62	3.32	1.38	17.96
	Diseases of the nervous system and organs of special sense	27.51	4.64	.22	2.14	21.72	1.67	....	.83	36.74	5.24	.08	1.64
60-74	Of the nervous system	13.74	3.97	.20	1.55	15.87	1.67	....	.68	16.75	2.91	.08	1.03
75	Of the eye and its annexa	9.01	.25	....	.33	2.51	....	....	.07	10.44	....	....	.3
76	Of the ear and its annexa	4.76	.42	.02	.25	3.34	....	....	.08	9.55	.32	....	.3
77-85	Diseases of the circulatory system	16.89	.94	.30	.96	8.35	....	....	.31	28.16	.16	.32	1.56
86-98	Diseases of the respiratory system	63.37	.28	.33	1.60	29.24	....	....	.62	39.49	.40	....	1.3
99-118	Diseases of the digestive system	155.58	.59	.20	3.26	87.71	....	1.67	1.39	195.60	.08	.65	4.6
119-127	Diseases of the genito-urinary system	12.03	.65	.20	.56	9.19	....	....	.28	11.25	.40	.16	.5
142-145	Diseases of the skin and cellular tissue	53.17	.18	.02	1.28	28.40	....	....	.79	109.49	....	....	3.0
146-149	Diseases of the organs of locomotion	25.75	1.66	....	1.15	33.42	....	....	1.01	30.10	.65	....	1.0
150	Malformations, etc	3.94	.02	....	.12	5.01	....	....	.15	3.64	....	....	.1
189	Ill-defined diseases	5.05	.02	.02	.22	6.68	....	....	.06	17.32	....	....	.2
	Total for disease	596.94	13.19	2.28	22.57	355.89	5.01	3.34	10.96	1,075.34	8.34	2.99	39.8
155-186	External causes	141.76	1.29	2.28	4.58	155.39	....	2.51	5.28	171.64	1.29	2.43	4.8
	Total for disease and external causes	738.70	14.48	4.55	27.15	511.28	5.01	5.85	16.24	1,246.99	9.63	5.42	44.7

NOTE.—In Table No. 76 noneffective rates of 0.005 or less are omitted

ressed in ratios per 1,000 of mean strength, for American troops (enlisted men) on duty r those serving at distant stations for the year 1912—Continued.

Hawaii.				Canal Zone, Panama.				China.				Transports.				Total American Army.			
Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
3.55	.....	.....	.....	.....	.....	.....	.....	1.82	.....	.....	.....	.....	.....	.....	.....	2.50	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.04	.....	0.03	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.01	.....
.....	.....	0.89	.....	.....	.....	2.59	.....	.....	.....	.....	.....	.....	.....	0.91	.....	.....	.....	.54	.....
2.37	0.59	.....	.....	1.29	.....	.....	.....	.91	.....	.....	.....	.....	.....	.....	.....	2.02	0.19	.14	.....
.30	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.10	.....	.05	.....
9.25	.....	.30	.....	24.58	.....	.....	.....	9.12	.....	.....	.....	0.91	.....	.....	.....	12.02	.10	.03	.....
8.72	.30	.30	.....	71.15	.....	.....	.....	43.76	.....	.....	.....	12.81	.....	.....	.....	48.23	.30	.18	.....
2.07	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1.19	.04	.01	.....
2.07	.....	.89	.....	1.29	.....	1.29	.....	.....	.....	1.82	.....	.91	.....	.....	.....	1.99	.10	.33	.....
8.14	.30	.....	.....	3.88	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	14.67	.08	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.57	.03	.....	.....
9.18	.....	.....	.....	2.59	.....	.....	.....	3.65	.....	.....	.....	.....	.....	.....	.....	2.21	.....	.01	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.06	.....	.03	.....
.30	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.01	.....	.....	.....
.30	.....	.30	.....	1.29	.....	2.59	.....	.....	.....	.....	.....	.....	.....	.....	.....	.10	.....	.25	.....
.....	.....	.....	.....	1.29	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.10	.....	.01	.....
1.60	.59	.....	.....	45.28	.....	.....	.....	40.11	.....	.....	.....	16.47	.....	.....	.....	58.30	.40	.01	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.03	.01	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.01	.01	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.01	.....	.....	.....
5.63	1.78	2.96	6.88	155.24	.....	7.76	3.44	101.19	.....	3.65	2.41	32.94	..	2.74	2.68	149.64	1.24	2.41	4.67
8.23	4.15	.59	11.02	270.38	3.88	1.29	12.08	324.52	.....	1.82	16.59	301.92	..	.91	16.06	291.90	3.96	1.12	13.61
4.50	.....	.....	1.15	166.88	.....	.....	7.29	88.42	.....	.....	2.07	171.09	.....	.....	4.12	122.03	.18	.26	3.29
3.72	4.15	.59	9.87	103.49	3.88	1.29	4.79	236.10	.....	1.82	14.51	130.83	..	.91	11.93	169.86	3.78	.85	10.33
5.25	5.03	.30	1.94	49.16	3.88	.....	2.40	20.97	5.47	.....	.82	29.28	..	.91	5.79	29.36	4.33	.20	2.06
8.96	4.44	.30	1.42	23.29	3.88	.....	1.48	15.50	5.47	.....	.73	9.15	..	.91	4.88	14.53	3.76	.19	1.48
9.48	.....	.....	.24	12.94	.....	.....	.34	3.65	.....	.....	.08	8.23	..	.....	.32	9.11	.19	.....	.32
6.81	.59	.....	.28	12.94	.....	.....	.58	1.82	.....	.....	.01	11.89	..	.....	.59	5.72	.39	.01	.26
9.03	2.37	.....	1.53	18.11	1.29	.....	1.09	20.05	.....	.91	.55	8.23	..	.....	.57	19.00	.84	.29	1.05
4.50	.59	.....	1.72	82.80	.....	.....	1.81	37.37	.....	.....	1.04	125.34	..	.91	2.70	59.38	.30	.26	15.57
5.95	.....	.....	4.46	117.72	.....	.....	3.22	117.59	.....	.91	2.12	161.94	..	.....	2.82	160.92	.45	.29	3.47
3.89	2.07	.....	.54	11.64	2.59	.....	.52	13.67	.....	.....	.82	3.66	..	.....	.59	11.63	.67	.18	.55
1.22	.....	.....	3.07	59.51	.....	.....	1.42	41.93	.....	.....	1.11	26.53	..	.....	.64	64.59	.14	.01	1.61
0.81	2.07	.....	2.04	28.46	3.88	.....	1.61	16.41	.....	.....	.48	8.23	..	.....	.85	26.42	1.47	.....	1.17
.89	.....	.....	.04	1.29	.....	.....	.10	1.82	.....	.....	.06	.....	.....	.....	.....	3.67	.01	.....	.12
5.92	.....	.....	.21	2.59	.....	.....	.06	1.82	.....	.....	.01	36.60	..	.91	.49	7.42	.01	.03	.23
0.69	16.29	.89	26.57	641.66	15.52	1.29	24.30	596.18	5.47	3.65	23.60	701.74	..	3.66	30.51	674.29	12.18	2.37	25.43
5.63	1.78	2.96	6.88	155.24	.....	7.76	3.44	101.19	.....	3.65	2.41	32.94	..	2.74	2.68	149.64	1.24	2.41	4.67
1.32	18.07	3.85	33.44	796.90	15.52	9.06	27.74	697.36	5.47	7.29	26.01	734.67	..	6.40	33.20	823.94	13.43	4.79	30.10

TABLE NO. 77.—*Total movement of sick for United States Army, enlisted men at home, compared with that of foreign armies.*

	United States (continental), American troops, enlisted men, 1912.		British (United Kingdom), year 1911.		Prussian, year 1910.		Bavarian, year 1910.		Austro-Hungarian, year 1910.		Russian, year 1910.	
Mean strength	58,374.		109,399.		551,237.		66,745.				1,227,100.	
	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.
Admitted to sick report, total	43,121	37,093	87,822	37,886	317,778	137,315	29,641	15,191			542,410	510,523
Ratio per 1,000 of mean strength	738.70	635.44	802.77	346.3	576.5	249.1	444.1	227.6	823.2	376.5	442.0	416.0
Disposed of all causes	43,529				316,669		29,696				541,814	
Ratio per 1,000 of mean strength	745.69				574.47		444.92				442.0	
Died of all causes	272		305		954		116				5,070	
Ratio per 1,000 of mean strength	4.55		2.47		1.73		1.74		2.84		4.13	
Ratio per 1,000 of all disposed of	6.25				3.01		3.91		2.23		8.1	
Died of disease	136		235		549		71				4,415	
Ratio per 1,000 of mean strength	2.28		1.90		1.00		1.06		1.83		3.60	
Died of injury	136		70		405		45				655	
Ratio per 1,000 of mean strength	2.28		.57		.73		.67		1.01		.53	
Died when on sick report or present with command	168		271		619		80					
Ratio per 1,000 of mean strength	2.88		2.19		1.12		1.20					
Ratio per 1,000 of all disposed of	3.86				1.95		2.69					
Died when not on sick report or absent from command	104		34		335		36					
Accidental deaths	1 89		39		167		21				387	
Suicides	47		31		238		24				268	
Returned to duty	40,753				296,579		27,458				496 870	
Ratio per 1,000 of all disposed of	936.23				936.6		924.64		868.2		917.1	
Otherwise disposed of	2,608				19,559		2,169				40,529	
Ratio per 1,000 of all disposed of	59.91				61.8		73.00		129.5		74.8	
Total days lost on account of sickness—all causes	579,892	534,113	1,084,324	722,000	4,898,184		534,419					
Constantly noneffective on account of sickness—all causes	1,584.40	1,459.32	2,970.75	2,197.26	13,419.68		1,464.16					
Ratio per 1,000 of mean strength	27.15	25.00	27.16	20.08	24.34		21.94					
Average days of treatment:												
For each soldier of mean strength	9.93	9.15		8.86	8.9		8.0		12.9		10.5	
For each case of sickness	13.45	14.40		21.18	15.0		17.5		15.1		23.8	
Discharges for disability—all causes	865		1,209		22,087		3,509				40,529	
Ratio per 1,000 of mean strength	14.48		9.78		40.1		52.6				33.0	
Total losses per 1,000 of mean strength	19.03		12.25		41.83		54.34				37.13	

	Spanish, year 1910.		Dutch, year 1910.		French (France), year 1910.		Japanese, year 1909.		Portuguese, year 1909.	
Mean strength	121,076.		23,407.		443,308.		196,764.		29,159.	
	To al.	Hospital.	Total.	Hospital.	Total.	Hospital.[2]	Total.	Hospital.	Total.	Hospital.
Admitted to sick report, total	123,177	53,051	29,970	14,703	899,218	320,650	168,438	29,361	22,803	19,220
Ratio per 1,000 of mean strength	1,017.3	438.1	1,280.0	628.0	1,982.0	677.0	856.30	149.26	782.0	659.0
Disposed of all causes	123,525		30,050				169,550		23,011	
Ratio per 1,000 of mean strength	1,020.23		1,283.80				861.96		789.16	
Died of all causes	566		52		1,588		703		69	
Ratio per 1,000 of mean strength	4.67		2.22		3.01		3.57		2.99	
Ratio per 1,000 of all disposed of	4.39		1.73				4.15		3.00	
Died of disease	548		48		1,337		563			
Ratio per 1,000 of mean strength	4.52		2.05		2.53		2.86			
Died of injury	18		4		251		140			
Ratio per 1,000 of mean strength	.13		.17		.47		.71			
Died when on sick report or present with command	561				1,327		571			
Ratio per 1,000 of mean strength	4.61				2.52		2.90			
Ratio per 1,000 of all disposed of	4.54						3.37			
Died when not on sick report or absent from command	5				261		132			
Accidental deaths	12		1		165		38			
Suicides	6		3		86		102			
Returned to duty	113,176		27,515				161,793		21,414	
Ratio per 1,000 of all disposed of	916.2		915.6				954.25		930.0	
Otherwise disposed of	9,806		2,489				7,186		1,528	
Ratio per 1,000 of all disposed of	79.4		82.8				42.38		66.0	
Total days lost on account of sickness—all causes	1,394,528			213,220	6,259,998	4,904,660	2,223,860		280,534	
Constantly noneffective on account of sickness—all causes	3,820.62			584.16	17,150.68	13,437.43	6,092.77		768.59	
Ratio per 1,000 of mean strength	31.56			24.95	32.58	27.71	30.97		26.36	
Average days of treatment:										
For each soldier of mean strength	11.5			9.1	11.9	10.1	11.31		9.62	
For each case of sickness	24.8			14.5	17.5	15.2	12.78		12.30	
Discharges for disability—all causes	4,075				21,400		5,298			
Ratio per 1,000 of mean strength	33.5				40.67		26.94			
Total losses per 1,000 of mean strength	38.17				43.68		30.51			

[1] Accidental deaths, United States, includes 13 homicides.
[2] French army (France), "Hospital" includes infirmary, cases, and days; "Total" includes those for "chambre," the equivalent of quarters in United States.

TABLE No. 78.—*A comparison of the admission and death rates of the United States Army enlisted men at home for certain special diseases with those of foreign armies.*

Diseases.	Admission rates per 1,000 of mean strength.										Death rate per 1,000 of mean strength.									
	United States, continental (excluding Alaska), year 1912.	British, year 1911.	Prussian, year 1910.	Bavarian, year 1910.	Austro-Hungarian, year 1910.	Russian, year 1910.	Spanish, year 1910.	Dutch, year 1910.	French, year 1910.	Japanese, year 1909.	United States, continental (excluding Alaska), year 1912.	British, year 1911.	Prussian, year 1910.	Bavarian, year 1910.	Austro-Hungarian, year 1910.	Russian, year 1910.	Spanish, year 1910.	Dutch, year 1910.	French, year 1910.	Japanese, year 1909.
1. Alkoholismus acutus, including delirium tremens	14.80	0.6	0.07	0.24	.....	0.07	0.18	0.256	0.23	0.01	0.12	0.02	.....	.....	.....	.....	.....	0.042	0.003	.....
2. Appendicitis typhlitis, perityphlitis	6.85	(1)	4.9	4.1	.....	2.35	.21	(1)	2.18	1.04	.07	(1)	0.07	0.12	.....	0.10	0.01	(1)	.07	0.04
3. Bronchitis acuta	36.45	[2]10.8	37.7	35.4	91.1	23.1	35.87	54.6	85.01	43.97	.....	.02	.....	.....	0.01	.....	.09	.....	.01	.....
4. Cholera Asiatica	.....	.2	.....	.....	.0	.44	.....	.....	.....	.01	.....	.09	.....	.....	.00	.14	.....	.....	.....	.01
5. Cholera nostras	.05	.....	.....	.....	.0	.02	.....	.....	.003	.01	.....	.....	.....	.....	.00	.002	.....	.....	.001	.01
6. Diphtheria et croup	1.30	.3	.80	.69	.2	.18	.01	.128	1.14	.02	.....	.02	.01	.....	.....	.01	.....	.....	.02	.01
7. Dysenteria	1.78	3.2	.44	.37	.2	.67	.54	.....	.59	.53	.02	.10	.....	.....	.02	.05	.008	.....	.003	.08
8. Erysipelas	.41	.3	.82	.94	1.2	3.69	3.70	2.47	1.37	.10	.....	.01	.01	.....	.02	.09	.008	.....	.01	.01
9. Febris intermittens (malaria)	12.42	35.8	.05	.06	2.8	28.8	13.93	2.00	.71	26.28	.....	.04	.....	.....	.....	.02	.04	.....	.....	.05
10. Febris recurrens	.....	(1)	.....	.....	.....	.06	.10	.....	.....	.....	.....	(1)	.....	.....	.....	.002	.....	.....	.....	.....
11. Fractura ossium	12 32	(1)	7.3	5.3	2.6	1.8	1.40	(1)	4.67	2.16	.22	(1)	.02	.04	.02	.02	.008	(1)	.12	.03
12. Gonorrhea	70.07	34.6	13.5	11.9	30.1	24.3	30.10	16.8	16.56	10.55	.02	.....	.....	.....	.00	.....	.....	.....	.....	.....
13. Hernia	4.20	3.1	2.7	2.3	6.0	2.4	2.58	4.1	9.08	.77	.....	.00	.....	.....	.....	.002	.....	.....	.007	.01
14. Influenza	16.65	5.8	12.2	16.8	3.1	33.5	41.18	22.00	8.60	2.92	.....	.....	.....	.01	.01	.07	.23	.....	.08	.....
15. Insolatio (Hitzschlag coup de chaleur)	.07	1.5	.16	.21	.2	.03	.14	.042	.16	2.09	.02	.11	.01	.....	.00	.....	.....	.....	.....	.09
16. Luxationes articulorum	3.17	(1)	1.3	1.1	.8	.82	.76	(1)	1.63	.76	.....	(1)	.....	.....	.....	.....	.....	(1)	.....	.....
17. Meningitis cerebro spinalis epidemica	.17	.1	.04	.27	.....	.005	.15	.....	.54	.14	.07	.06	.02	.10	.....	.003	.11	.....	.12	.07
18. Morbilli	7.30	1.7	.36	.66	.6	.38	5.62	.085	14.55	1.30	.20	.....	.....	.....	.01	.01	.14	.....	.10	.....
19. Parotitis epidemica	19.17	.5	.81	2.0	2.1	4.1	6.15	.256	15.68	.33	.....	.....	.....	.....	.00	.001	.008	.....	.007	.....
20. Pleuritis	3.41	(1)	3.3	2.5	5.4	10.1	2.37	(1)	9.28	15.30	.....	(1)	.04	.03	.04	.17	.06	(1)	.10	.14
21. Pneumonia crouposa sive lobaris	2.38	[3]2.7	3.8	4.4	3.0	4.59	2.86	3.67	2.65	5.18	.20	[3].30	.15	.15	.13	.33	.23	.29	.19	.30
22. Rheumatismus articulorum	9.78	4.9	6.3	8.0	12.9	6.26	23.94	10.8	19.98	6.39	.05	.00	.02	.04	.02	.01	.03	.042	.01	.01
23. Scarlatina	.24	1.0	.74	1.0	.3	.15	.20	.51	3.68	.....	.....	.01	.02	.03	.02	.01	.008	.....	.07	.....
																.01				

25. Syphilis	25.58	29.3	5.3	4.2	16.7	15.1	11.91	4.14	5.28	6.77	.03	.03	.....	.....	.01	.01	.01	.....	.003	.....
26. Trachoma	.39	.0	.24	.....	4.1	5.3	.02	.....	.04	4.70	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
27. Tuberculosis pulmonum	2.88	1.3	1.4	1.4	1.4	2.09	5.81	4.82	4.73	3.85	.22	.15	.09	.13	.41	.55	.54	.34	.33	.16
28. Tuberculosis ceterorum organorum	.37	.4	.46	.24	3.1	1.42	.35	1.1	2.02	1.26	.05	.07	.08	.03	.20	.14	.04	.042	.33	.33
29. Typhus abdominalis	.26	1.7	.19	.13	1.3	5.2	7.03	.51	2.38	5.47	.03	.20	.06	.03	.20	.75	1.20	.128	.31	.55
30. Typhus exanthematicus	.....	.....	.....	.....	.0	.17	.....	.....	.....	.01	.....	.....	.....	.....	.....	.02	.....	.....	.....	.....
31. Ulcus molle	20.09	[1]	1.8	1.2	8.4	8.0	31.27	[1]	1.49	7.69	.....	[1]	.....	.....	.....	.....	.....	[1]	.....	.....
32. Variola	.10	.0	.....	.....	.0	.18	.46	.....	.02	.01	.....	.....	.....	.....	.....	.02	.01	.....	.....	.....
33. Morbi auris	4.76	7.8	11.1	11.9	17.8	16.3	9.10	14.48	8.77	8.33	.02	.03	.02	.03	.02	.20	.03	.....	.02	.01
34. Morbi cordis	2.67	3.9	3.1	2.7	6.0	4.1	5.34	3.1	3.27	1.24	.20	.17	.02	.01	.07	.05	.10	.128	.04	.05
35. Morbi cutis	22.81	27.1	19.0	7.4	179.1	39.32	44.09	147.4	16.03	152.65	.....	.00	.01	.....	.02	.05	.03	.....	.001	.02
36. Morbi mentis	3.26	.8	1.5	2.0	1.5	.57	.71	1.96	.59	.34	.03	.01	.....	.....	.01	.01	.....	.....	.01	.....
37. Morbi oculi	9.01	6.1	11.6	6.7	33.3	16.4	15.25	21.7	5.92	27.01	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
38. Morbi systemat urin et sexual (excluding venerie et syphilis)	12.03	9.3	6.4	5.7	14.3	8.2	9.34	10.16	9.43	8.62	.20	.11	.05	.03	.06	.09	.02	.085	.07	.05

[1] Disease not reported in table.

[2] All; acute not tabulated separately.

[3] All pneumonia; croupous not tabulated separately.

TABLE No. 79.—*Showing the most important diseases, by divisions, in the United States (continental, excluding Alaska), year 1912—enlisted men.*

Diseases.	Admissions, absolute numbers.									Admissions per 1,000 of mean strength, proportionate numbers.								
	Eastern division.	Central division.	Western division.	Recruit depots.	Independent stations.	General hospitals.	Total.	Races.		Eastern division.	Central division.	Western division.	Recruit depots.	Independent stations.	General hospitals.	Total.	Races.	
								White.	Colored.								White.	Colored.
1. Alkoholismus acutus, including delirium tremens	396	217	145	51	36	19	864	849	15	19.47	11.29	12.18	10.35	24.71	36.89	14.80	15.19	6.03
2. Appendicitis, typhlitis, perityphlitis	116	124	70	45	12	33	400	386	14	5.70	6.45	5.88	9.13	8.24	64.08	6.85	6.91	5.63
3. Bronchitis acuta	566	542	454	510	39	17	2,128	2,050	78	27.82	28.19	38.14	103.47	26.77	33.01	36.45	36.68	31.35
4. Cholera Asiatica	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. Cholera nostras	3	.....	.....	.....	.....	.....	3	3	.....	.15	.....	.....	.....	.....	.....	.....	.....	.....
6. Diphtheria	5	65	4	2	.....	.....	76	76	.....	.25	3.38	.34	.41	.....	.....	1.30	1.36	.....
7. Dysenteria	24	57	16	3	.....	4	104	99	5	1.18	2.96	1.34	.61	.....	7.77	1.78	1.77	2.01
8. Erysipelas	2	7	7	7	1	.....	24	23	1	.10	.36	.59	1.42	.69	.....	.41	.41	.40
9. Febris intermittens (malaria)[1]	310	144	92	142	31	6	725	720	5	15.24	7.49	7.73	28.81	21.28	11.65	12.42	12.89	2.01
10. Febris recurrens	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. Fractura ossium	219	258	151	67	18	6	719	694	25	10.77	13.42	12.69	13.59	12.35	11.65	12.32	12.42	10.05
12. Gonorrhea	1,354	1,371	808	487	36	34	4,090	3,905	185	66.56	71.31	67.88	98.80	24.71	66.02	70.07	69.87	74.36
13. Hernia	64	66	41	60	10	4	245	237	8	3.15	3.43	3.44	12.17	6.86	7.77	4.20	4.24	3.22
14. Influenza	299	291	250	35	88	9	972	956	16	14.70	15.16	21.00	7.10	60.40	17.48	16.65	17.10	6.43
15. Insolatio (Hitzschlag coup de chaleur)	1	2	.....	.....	1	.....	4	4	.....	.05	.10	.....	.....	.69	.....	.07	.07	.....
16. Luxationes articulorum	68	60	36	18	3	.....	185	175	10	3.34	3.12	3.02	3.65	2.06	.....	3.17	3.13	4.02
17. Meningitis cerebro-spinalis epidemica	1	4	1	6	.....	.....	12	12	.....	.05	.21	.08	1.22	.....	.....	.21	.21	.....
18. Morbilli	88	42	51	244	1	.....	426	422	4	4.33	2.18	4.28	49.50	.69	.....	7.30	7.55	1.61
19. Parotitis epidemica	216	392	141	368	.....	2	1,119	1,106	13	10.62	20.39	11.84	74.66	.....	3.88	19.17	19.79	5.23
20. Pleuritis	56	76	33	28	.....	6	199	189	10	2.75	3.95	2.77	5.68	.....	11.65	3.41	3.38	4.02
21. Pneumonia crouposa sive lobaris	32	41	30	32	1	3	139	132	7	1.57	2.13	2.52	6.49	.69	5.83	2.38	2.36	2.81
22. Rheumatismus articulorum	130	191	138	86	11	15	571	545	26	6.39	9.93	11.59	17.45	7.55	29.13	9.78	9.75	10.45
23. Scarlatina	1	3	5	3	.....	2	14	14	.....	.05	.16	.42	.61	.....	3.88	.24	.25	.....
24. Scorbutus	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
25. Syphilis	653	392	237	155	22	34	1,493	1,444	49	32.10	20.39	19.91	31.45	15.10	66.02	25.58	25.84	19.69
26. Trachoma	1	5	.....	17	.....	.....	23	23	.....	.05	.26	.....	3.45	.....	.....	.39	.41	.....
27. Tuberculosis pulmonum[2]	38	44	48	33	1	4	168	164	4	1.87	2.29	4.03	6.70	.69	7.77	2.88	2.93	1.61
28. Tuberculosis ceterorum organorum	7	5	8	2	.....	.....	22	19	3	.34	.26	.67	.41	.....	.....	.38	.34	1.20
29. Typhus abdominalis	3	3	2	7	.....	.....	15	15	.....	.15	.16	.17	1.42	.....	.....	.26	.27	.....
30. Typhus exanthematicus	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
31. Ulcus molle	472	420	145	113	11	12	1,173	1,147	26	23.20	21.85	12.18	22.93	7.55	23.30	20.09	20.52	10.45
32. Variola	1	.....	4	1	.....	.....	6	6	.....	.05	.....	.34	.20	.....	.....	.10	.11	.....
33. Morbi auris	70	77	73	54	3	1	278	268	10	3.44	4.01	6.13	10.95	2.06	1.94	4.76	4.80	4.02
34. Morbi cordis[3]	28	28	16	31	3	3	109	106	3	1.38	1.46	1.34	6.29	2.06	5.83	1.87	1.89	1.21
35. Morbi cutis[4]	468	457	372	337	39	13	1,686	1,645	41	23.01	23.77	31.25	68.37	26.77	25.24	28.88	29.44	16.48

36. Morbi inguinis	42	49	52	38	3	6	190	182	8	2.06	2.55	4.37	7.71	2.06	11.65	3.26	3.25	3.22
37. Morbi oculi	149	157	115	89	11	5	526	500	26	7.32	8.17	9.66	18.06	7.55	9.71	9.01	8.95	10.45
38. Morbi systemat. urin. et sexual (excluding venerie et syphilis)	202	222	117	139	15	7	702	675	27	9.93	11.55	9.83	28.20	10.30	13.59	12.03	12.08	10.85

[1] Malarial fever, intermittent only. [2] Includes tuberculosis of the larynx. [3] Includes pericarditis and endocarditis. [4] Diseases of the skin proper only.

TABLE NO. 80.—*Comparative figures, Army, by years, 1908–1912.*

ABSOLUTE NUMBERS (ENLISTED MEN).

Army.	Mean strength.	Admissions to sick report.		Discharges on certificate of disability.		Deaths.		Total losses.		Total days.				Constantly noneffective.			
		From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.		From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
										Total.	In hospital.	Total.	In hospital.	Total.	In hospital.	Total.	In hospital.
1912	78,267	64,487	39,952	1,069	844	381	169	1,450	1,013	862,221	790,213	494,236	459,521	2,355.80	2,159.05	1,350.37	1,255.52
1911	72,748	68,073	39,364	1,011	799	348	181	1,359	980	883,646	798,382	465,853	426,534	2,420.95	2,187.35	1,276.31	1,195.98
1910	71,534	67,940	39,754	1,007	776	320	165	1,327	941	938,210	850,301	483,979	442,868	2,570.44	2,329.59	1,325.97	1,213.34
1909	74,319	79,000	46,809	1,270	918	370	221	1,640	1,139	1,125,333	994,411	597,032	534,125	3,083.10	2,724.41	1,635.70	1,463.36
1908	65,406	77,704	46,110	1,248	928	414	217	1,662	1,195	1,021,690	888,590	566,864	502,635	2,791.50	2,427.84	1,548.81	1,373.32

TABLE No. 80.—*Comparative figures, Army, by years, 1908–1912*—Continued.

PROPORTIONATE NUMBERS (ENLISTED MEN).

Army.	Mean strength.	Ratios per 1,000 of mean strength.												Average number of days lost.			
		Admissions to sick report.		Discharges on certificate of disability.		Deaths.		Total losses.		Noneffective from sickness.				From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
										From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.					
		From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
1912.....	78,267	823.94	510.46	13.43	10.60	4.79	2.12	18.22	12.72	30.10	27.58	17.25	16.04	11.02	13.37	6.31	12.37
1911.....	72,748	935.74	541.10	13.85	10.94	4.77	2.48	18.62	13.42	33.28	30.07	17.54	16.06	12.15	12.98	6.40	11.83
1910.....	71,534	949.76	555.74	14.02	10.81	4.46	2.30	18.48	13.11	35.93	32.57	18.53	16.96	13.12	13.81	6.77	12.17
1909.....	74,319	1,062.99	629.84	16.84	12.18	4.91	2.93	21.75	15.11	41.48	36.66	22.01	19.69	15.14	14.24	8.03	12.75
1908.....	65,406	1,188.03	704.98	18.48	13.75	6.13	3.21	24.61	16.96	42.68	37.12	23.68	21.00	15.62	13.15	8.67	12.29

TABLE No. 81.—*Ratios per 1,000 of mean strength for "total admissions" and for "Case admissions" for enlisted American troops in the Army (as a whole), in the United States (continental) excluding Alaska, and in the Philippine Islands, for the years 1904 to 1911, for disease, external causes, and all causes.*

[Ratio per 1,000 of mean strength.]

Year.		Army.		United States (continental) excluding Alaska.		Philippine Islands.	
		Total admissions.	Case admissions.	Total admissions.	Case admissions.	Total admissions.	Case admissions.
1904	Disease	1,114	1,002	1,049	951	1,473	1,293
	External causes	241	228	257	242	215	204
	All causes	1,355	1,230	1,306	1,193	1,688	1,497
1905	Disease	1,058	975	998	921	1,387	1,260
	External causes	238	226	252	239	213	207
	All causes	1,296	1,201	1,250	1,160	1,600	1,467
1906	Disease	1,053	987	944	879	1,494	1,409
	External causes	224	216	236	226	206	202
	All causes	1,277	1,203	1,180	1,105	1,700	1,611
1907	Disease	1,005	926	956	885	1,260	1,153
	External causes	213	206	216	208	223	216
	All causes	1,218	1,132	1,172	1,093	1,483	1,369
1908	Disease	963	891	922	860	1,208	1,097
	External causes	225	217	227	219	232	222
	All causes	1,188	1,108	1,149	1,079	1,440	1,319
1909	Disease	866	791	822	750	1,156	1,062
	External causes	197	190	202	195	192	185
	All causes	1,063	981	1,024	945	1,348	1,247
1910	Disease	766	707	715	662	1,048	956
	External causes	184	178	184	178	195	188
	All causes	950	885	899	840	1,243	1,144
1911	Disease	770	718	726	680	1,028	947
	External causes	166	161	162	157	190	185
	All causes	936	879	888	837	1,218	1,132

INTERNATIONAL MILITARY MEDICAL STATISTICS FOR THE YEAR 1912.

The following tables are those agreed upon at the International Commission for the Unification of the Medical Statistics of Armies, held at Budapest in 1894, at Madrid in 1903, and modified by the last meeting held at Berlin in 1907. They are calculated for the United States Army proper (white and colored) and include enlisted men only. Dispositions include cases remaining from last year. Deaths include suicides and accidents. Days lost include those lost this year by cases remaining from last year.

Table I shows in absolute numbers, by divisions, the mean strength of the command, the admissions to quarters, to hospital, and total admissions; the disposition of the sick, total, and the number returned to duty, died, and otherwise disposed of, and the total number of days sickness.

Table II gives the same data in ratios per 1,000, and also shows the days lost per soldier and per admission.

Table III shows, by arms of service, the mean strength, the total admissions, and those to hospital only, the total dispositions, and the number of those returned to duty, and the number that died.

Table IV gives the same data as Table III by months.

Table V shows for each of the larger garrisons the mean strength, admissions to hospital, total admissions, and the deaths.

Table VI shows for each of the 38 diseases or disease groups agreed upon by the International Commission, the number remaining under treatment at the commencement and close of the current year, the admissions and dispositions for the year, the total sick days, and the average number of days per case.

Table VII shows the admissions, by arms of service, for the diseases and disease groups referred to in Table VI.

Table VIII shows the same data as Table VII by months.

Table IX shows deaths by rank, by length of service, and by age.

Table X shows the same data as Table IX for discharges for physical disability.

INTERNATIONAL TABLE I.—*Movement of sick by Army corps (divisions)—Absolute numbers (enlisted men).*

Divisions.	Mean strength.	Admitted sick.			Sick disposed of.				Total days sick.
		Total.	To hospital.	To quarters.	Returned to duty (recovered).	Died.	Otherwise disposed of.	Total.	
United States (excluding Alaska):									
Eastern Division	20,343	13,441	11,585	1,856	12,326	70	776	13,172	124,085
Central Division	19,226	13,009	11,309	1,700	12,453	82	392	12,927	167,865
Western Division	11,904	8,148	6,698	1,450	6,068	44	239	6,351	71,434
Recruit depots	4,929	7,013	6,500	513	6,597	32	657	7,286	77,683
Independent stations	1,457	1,057	580	477	1,014	8	18	1,040	9,206
General hospitals	515	453	421	32	2,295	36	526	2,857	129,569
Total	58,374	43,121	37,093	6,028	40,753	272	2,608	43,633	579,892
Alaska	1,197	612	488	124	606	7	12	625	7,114
Canal Zone, Panama	773	616	321	295	560	7	40	607	7,848
Hawaii	3,376	3,161	2,719	442	3,003	13	116	3,132	41,323
China	1,097	765	510	255	711	8	25	744	10,442
Philippines Division	12,357	15,409	13,746	1,663	14,954	67	543	15,564	202,321
Army transports	1,093	803	776	27	705	7	18	730	13,281
Army	78,267	64,487	55,653	8,834	61,292	381	3,362	65,035	862,221

INTERNATIONAL TABLE II.—*Movement of sick by Army corps (divisions)—Proportionate numbers (enlisted men).*

Divisions.	In 1,000 of mean strength.			In 1,000 disposed of.			Days lost.	
	Total admissions.	Admissions to hospital.	Deaths.	Returned to duty (recovered).	Died.	Otherwise disposed of.	Per soldier.	Per admission.
United States (excluding Alaska):								
Eastern Division	660.72	569.48	3.44	935.77	5.31	58.91	6.10	9.23
Central Division	676.64	588.21	4.27	963.33	6.34	30.32	8.73	12.90
Western Division	684.48	562.67	3.70	955.44	6.93	37.63	6.01	8.77
Recruit depots	1,422.80	1,318.73	6.49	905.44	4.39	90.17	15.76	11.08
Independent stations	725.46	398.08	5.49	975.00	7.69	17.31	6.32	8.71
General hospitals	879.61	817.48	.....	803.29	12.60	184.11	.....	.....
Total	738.70	635.44	4.55	933.99	6.23	59.77	9.93	13.45
Alaska	511.28	407.69	5.85	969.60	11.20	19.20	5.94	11.62
Canal Zone, Panama	796.90	415.27	9.06	922.57	11.53	65.90	10.15	12.74
Hawaii	936.32	805.40	3.85	958.81	4.15	37.04	12.24	13.08
China	697.36	464.91	7.29	955.65	10.75	33.60	9.52	13.65
Philippines Division	1,246.99	1,112.41	5.42	960.81	4.30	34.88	16.37	13.13
Army transports	734.68	709.97	6.40	965.65	9.59	24.66	12.15	16.54
Army	823.94	711.07	4.79	942.45	5.86	51.70	11.02	13.37

INTERNATIONAL TABLE III.—*Movements of sick by arms of service—Army—enlisted men.*

Arms of service.	Absolute numbers.						Proportionate numbers.				
	Mean strength.	Sick admissions.		Sick disposed of.			Per 1,000 of mean strength.			Per 1,000 of sick disposed of.	
		Total.	To hospital.	Total.	Fit for duty (recovered).	Deaths.	Total sick admissions.	Admissions to hospital.	Deaths.	Fit for duty (recovered).	Deaths.
Infantry	27,860	23,206	19,661	23,191	21,745	162	832.95	705.71	5.74	937.64	6.99
Cavalry	13,122	11,688	10,046	11,919	11,372	52	890.74	765.59	3.90	954.11	4.36
Coast Artillery	17,438	11,754	10,347	11,853	11,058	63	674.04	593.35	3.54	932.93	5.32
Field Artillery	5,116	5,027	4,439	5,090	4,894	16	982.60	867.67	3.07	961.49	3.14
Engineers	1,747	1,357	1,090	1,383	1,292	10	776.76	623.93	5.63	934.20	7.23
Ordnance	706	554	367	560	538	5	784.71	519.83	6.94	960.72	8.93
Signal Corps	1,177	713	574	724	685	7	605.78	487.68	5.86	946.14	9.67
Hospital Corps	3,407	2,156	1,936	2,199	2,036	19	632.81	568.24	5.48	925.88	8.64
Others	7,694	8,032	7,193	8,116	7,672	47	1,043.94	934.89	5.98	945.30	5.79
Total	78,267	64,487	55,653	65,035	61,292	381	823.94	711.07	4.79	942.45	5.86

Ratios for deaths based on mean strength present and absent, total, 79,613.

INTERNATIONAL TABLE IV.—*Movement of sick by months (enlisted men).*

AMERICAN TROOPS AT HOME.

Month.	Absolute numbers.						Proportionate numbers.				
	Mean strength.	Sick admissions.		Sick disposed of.			Per 1,000 of mean strength.			Per 1,000 sick disposed of.	
		Total.	To hospital.	Total.	Fit for duty (recovered).	Deaths.	Total sick admissions.	Admissions to hospital.	Deaths.	Fit for duty (recovered).	Deaths.
January	54,703	3,960	3,582	3,910	3,729	13	72.39	65.48	0.24	953.71	3.33
February	55,512	3,918	3,537	3,841	3,681	22	70.58	63.72	.39	958.35	5.73
March	56,176	4,303	3,832	4,350	4,152	31	76.60	68.21	.54	954.49	7.13
April	57,667	3,898	3,497	3,930	3,751	21	67.60	60.64	.35	954.45	5.34
May	58,317	3,667	3,281	3,811	3,642	24	62.88	56.26	.40	953.97	6.11
June	57,018	3,303	2,829	3,393	3,185	29	57.93	49.62	.48	938.70	8.55
July	60,014	3,395	2,717	3,338	3,081	17	56.57	45.27	.28	923.01	5.09
August	59,825	3,390	2,668	3,436	3,164	31	56.67	44.60	.50	920.84	9.02
September	60,524	3,216	2,680	3,311	3,037	24	53.14	44.28	.39	917.25	7.25
October	60,077	3,301	2,688	3,425	3,058	18	54.95	44.74	.29	892.85	5.26
November	60,325	3,203	2,753	3,306	2,947	17	53.10	45.64	.28	891.41	5.14
December	60,333	3,567	3,029	3,584	3,326	25	59.12	50.20	.42	928.01	6.98
Total.	58,374	43,121	37,093	43,633	40,753	272	738.70	635.44	4.55	933.99	6.23

AMERICAN TROOPS IN THE PHILIPPINE ISLANDS.

Month.	Absolute numbers.						Proportionate numbers.				
	Mean strength.	Sick admissions.		Sick disposed of.			Per 1,000 of mean strength.			Per 1,000 sick disposed of.	
		Total.	To hospital.	Total.	Fit for duty (recovered).	Deaths.	Total sick admissions.	Admissions to hospital.	Deaths.	Fit for duty (recovered).	Deaths.
January	14,315	1,432	1,303	1,422	1,380	9	100.03	91.02	0.67	970.46	6.33
February	15,180	1,287	1,033	1,298	1,265	6	84.78	68.05	.40	974.57	4.62
March	13,718	1,378	1,195	1,362	1,327	5	100.45	87.11	.36	974.30	3.67
April	13,573	1,325	1,203	1,337	1,292	10	97.62	88.63	.74	966.34	7.48
May	12,075	1,375	1,271	1,343	1,313	4	113.87	105.26	.33	977.66	2.98
June	11,040	1,374	1,273	1,395	1,368	5	124.46	115.31	.45	980.64	3.58
July	11,275	1,535	1,398	1,532	1,482	4	136.14	123.99	.35	967.36	2.61
August	11,478	1,396	1,227	1,370	1,296	4	121.62	106.90	.35	945.99	2.92
September	11,585	1,309	1,145	1,329	1,272	2	112.99	98.83	.17	957.11	1.50
October	11,321	1,126	1,002	1,193	1,104	5	99.46	88.51	.44	925.40	4.19
November	11,174	945	840	1,024	969	6	84.57	75.17	.54	946.29	5.86
December	11,546	927	856	959	886	7	80.28	74.13	.61	923.88	7.30
Total.	12,357	15,409	13,746	15,564	14,954	67	1,246.99	1,112.41	5.42	960.81	4.30

INTERNATIONAL TABLE V.—*Movement of sick in the larger garrisons—Officers and enlisted men.*

Garrisons.	Mean strength.	Total admissions.		Admissions to hospital.		Deaths.	
		Absolute numbers.	Per 1,000 of mean strength.	Absolute numbers.	Per 1,000 of mean strength.	Absolute numbers.	Per 1,000 of mean strength.
Fort D. A. Russell, Wyo	2,314	1,917	828.44	1,853	800.78	12	5.19
Fort Leavenworth, Kans	2,108	1,420	673.62	1,284	609.11	13	6.17
Presidio of San Francisco, Cal	1,988	1,641	825.45	1,301	654.43	3	1.51
Fort Riley, Kans	1,955	1,276	652.69	1,149	587.72	6	3.07
Vancouver Barracks, Wash	1,370	1,124	820.44	939	685.40	3	2.19
Fort Monroe, Va	1,369	770	562.45	675	493.06	3	2.19
Fort Slocum, N. Y	1,297	2,097	1,616.81	2,051	1,581.34	6	4.63
Jefferson Barracks, Mo	1,224	1,391	1,136.44	1,362	1,112.75	8	6.54
Fort Sheridan, Ill	1,215	717	590.12	655	539.09	5	4.12
Columbus Barracks, Ohio	1,195	2,056	1,720.50	1,919	1,605.86	16	13.39
Fort Sam Houston, Tex	1,083	1,011	933.52	867	800.55	5	4.62
Fort Snelling, Minn	1,024	825	805.66	718	701.17	3	2.93
Fort Sill, Okla	980	558	569.39	533	543.88	3	3.06
Fort Douglas, Utah	876	787	898.40	662	755.71	6	6.85
Monterey (Presidio of) Cal	850	716	842.35	602	708.24	5	5.88
Fort Oglethorpe, Ga	845	887	1,049.70	575	680.47	3	3.55
Plattsburgh Barracks, N. Y	817	481	588.74	423	517.75	2	2.45
Fort Ethan Allen, Vt	799	490	613.27	457	571.96	4	5.01
West Point, N. Y	784	431	549.74	336	428.57	4	5.10
Fort Totten, N. Y	769	508	660.60	419	544.86	3	3.90
Fort McPherson, Ga	761	714	938.24	632	830.49	4	5.26
Fort McKinley, Me	758	415	547.49	365	481.53	2	2.64
Fort Hancock, N. J	749	347	463.28	295	393.86	2	2.67
Fort Benjamin Harrison, Ind	744	687	923.39	520	698.92	2	2.69
Fort Des Moines, Iowa	730	554	758.90	368	504.11	2	2.74
Fort Myer, Va	714	475	665.27	458	641.46	2	2.80
Fort Terry, N. Y	712	419	588.48	385	540.73	2	2.81
Fort H. G. Wright, N. Y	685	462	674.45	405	591.24	2	2.92
Fort McDowell, Cal	677	579	855.24	493	728.21	.....	.....
Washington Barracks, D. C	649	322	496.15	145	223.42	2	3.08
Fort Logan, Colo	646	963	1,490.71	684	1,058.82	2	3.10
Fort Worden, Wash	644	285	442.55	256	397.52	2	3.11
Fort Winfield Scott, Cal	611	284	464.81	179	292.96	1	1.64
Fort William H. Seward, Alaska	362	208	574.59	170	469.61	2	5.52
Fort Gibbon, Alaska	297	137	461.28	112	377.10	2	6.73
Fort Liscum, Alaska	200	94	470.00	68	340.00	1	5.00
Fort St. Michael, Alaska	167	72	431.14	60	359.28	1	5.99
Fort Davis, Alaska	158	102	645.57	72	455.70	1	6.33
Schofield Barracks, Hawaii	2,773	2,731	984.85	2,299	829.06	13	4.69
Fort Shafter, Hawaii	372	319	857.53	284	763.44	1	2.69
Fort Ruger, Hawaii	236	95	402.54	68	288.14	1	4.24
Fort DeRussy, Hawaii	168	101	601.19	73	434.52	.....	.....
Fort Wm. McKinley, P. I	3,228	4,320	1,338.29	3,970	1,229.86	14	4.34
Fort Mills, P. I	1,653	1,290	780.40	1,193	721.72	3	1.81
Camp Keithley, P. I	1,288	918	712.73	904	701.86	12	9.32
Camp Stotsenburg, P. I	1,232	1,696	1,376.62	1,589	1,289.77	7	5.68
Augur Barracks, P. I	1,108	1,844	1,664.26	1,780	1,606.50	5	4.51
Camp Gregg, P. I	859	257	299.19	241	280.56	4	4.66
Camp McGrath, P. I	834	1,608	1,928.06	1,013	1,214.63	1	1.20
Cuartel de Espana, P. I	740	509	687.84	467	631.08	.....	.....
Sudlow Barracks, P. I	580	713	1,229.31	682	1,175.86	3	5.17
Pettit Barracks, P. I	508	413	812.99	406	799.21	1	1.97
Camp Eldridge, P. I	460	482	1,047.83	447	971.74	6	13.04
Camp Jossman, P. I	408	507	1,242.65	421	1,031.86	5	12.25
Camp Connell, P. I	348	244	701.15	232	666.67	1	2.87
Regan Barracks, P. I	331	312	942.60	294	888.22	1	3.02
Warwick Barracks, P. I	324	227	700.62	206	635.80	2	6.17
Correy Barracks, P. I	314	188	598.73	185	589.17	2	6.37

INTERNATIONAL TABLE VI.—*Movement of sick according to most important diseases, Army, enlisted men, year 1912.*

Diseases of the international nosological table.	Absolute numbers.									Proportionate numbers.					
	Remaining at close of 1911.	Admitted 1912.	Total remaining and admitted.	Disposed of in 1912.				Remaining at close of 1912.	Total days sick in 1912.	Per 1,000 of mean strength.		Per 1,000 disposed of.			Average days of treatment.
				Fit for duty.	Died.	Otherwise.	Total.			Admissions.	Deaths.	Fit for duty.	Died.	Otherwise.	
1. Alkoholismus acutus, including delirium tremens	21	1,201	1,222	1,175	10	26	1,211	14	4,777	15.34	0.13	970.27	8.26	21.47	3.98
2. Appendicitis, typhilitis, and perityphlitis	40	516	556	482	8	22	512	43	14,874	6.59	.10	941.41	15.63	42.97	28.82
3. Bronchitis acuta	29	2,590	2,619	2,525	.....	28	2,553	66	17,022	33.09	.....	989.03	.....	10.97	6.57
4. Cholera Asiatica	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. Cholera nostras	.....	3	3	3	.....	.....	3	.....	8	.04	.....	1,000.00	.....	.....	2.67
6. Diphtheria et croup	13	79	92	88	.....	2	90	3	1,614	1.01	.....	977.78	.....	22.22	20.43
7. Dysenteria	21	337	358	318	2	17	337	20	8,834	4.31	.03	943.62	5.93	50.45	26.21
8. Erysipelas	.....	27	27	24	.....	2	26	1	454	.34	.....	923.07	.....	76.92	16.81
9. Febris intermittens (malaria) [1]	39	2,307	2,346	2,305	.....	31	2,336	11	15,841	29.48	.....	986.72	.....	13.27	6.87
10. Febris recurrens	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. Fractura ossium	98	938	1,036	863	18	69	950	104	41,343	11.98	.23	908.42	18.95	72.63	44.08
12. Gonorrhea	379	6,208	6,587	5,312	1	1,089	6,402	186	119,573	79.32	.01	829.74	.10	170.10	19.26
13 Hernia	27	299	326	260	.....	41	301	26	11,877	3.82	.....	863.79	.....	136.21	39.72
14. Influenza	10	1,262	1,272	1,202	.....	13	1,215	57	7,419	16.12	.....	989.30	.....	10.70	5.88
15. Insolatio (Hitzschlag coup de chaleur)	.....	5	5	4	1	.....	5	.....	97	.06	.01	800.00	200.00	.....	19.40
16. Luxationes articulorum	13	231	244	229	.....	8	237	9	4,699	2.95	.....	966.24	.....	33.76	20.34
17. Meningitis cerebro-spinalis epidemica	.....	13	13	3	6	1	10	3	256	.17	.08	300.00	600.00	100.00	19.69
18. Morbilli	47	508	555	494	13	34	541	13	10,952	6.49	.16	913.12	24.03	62.85	21.56
19. Parotitis epidemica	33	1,330	1,363	1,279	.....	.....	1,279	42	22,099	16.99	.....	1,000.00	.....	.....	16.62
20. Pleuritis	9	252	261	236	.....	9	245	16	6,666	3.22	.....	963.27	.....	36.73	26.45
21. Pneumonia crouposa sive lobaris	9	178	187	148	12	7	167	20	5,156	2.27	.15	886.22	71.86	41.92	28.97
22. Rheumatismus articulorum	31	713	744	657	5	36	698	45	16,833	9.11	.06	941.26	7.16	51.58	23.61
23. Scarlatina	.....	14	14	12	.....	1	13	1	400	.18	.....	923.08	.....	76.92	28.57
24. Scorbutus	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
25. Syphilis	187	2,224	2,411	2,153	6	182	2,341	69	56,420	28.42	.08	919.69	2.56	77.74	25.37
26. Trachoma	2	25	27	21	.....	3	24	3	480	.32	.....	875.00	.....	125.00	19.20
27. Tuberculosis pulmonum [2]	78	241	319	33	21	126	180	136	37,572	3.08	.26	183.33	116.67	700.00	155.90
28. Tuberculosis ceterorum organorum	3	32	35	16	4	9	29	10	2,577	.42	.05	551.72	137.93	310.34	80.53
29. Typhus abdominalis	9	21	30	25	2	2	29	1	1,453	.27	.03	862.07	68.97	68.97	69.19
30. Typhus exanthematicus	.....	1	1	1	.....	.....	1	.....	42	.01	.....	1,000.00	.....	.....	42.00
31. Ulcus molle	174	2,267	2,441	2,107	1	288	2,396	45	47,045	28.96	.01	879.38	.42	120.20	20.75
32. Variola	1	6	7	6	.....	.....	6	1	192	.08	.....	1,000.00	.....	.....	32.00
33. Morbi auris	26	448	474	417	1	45	463	11	7,558	5.72	.01	900.65	2.16	97.19	16.87

34. Morbi cordis [3]	16	145	161	76	8	63	147	13	6,498	1.85	.18	517.01	54.42	428.57	44.81
35. Morbi cutis [4]	54	2,494	2,548	2,464	.....	36	2,500	48	24,825	31.84	.....	985.60	.....	14.40	9.95
36. Morbi mentis	40	270	310	46	2	219	267	44	22,124	3.45	.03	172.28	7.49	820.22	81.94
37. Morbi oculi	26	713	739	680	.....	31	711	28	9,117	9.11	.....	956.40	.....	43.60	12.79
38. Morbi systemat urin et sexual (excluding venerie et syphilis)	42	910	952	824	14	85	923	29	15,841	11.63	.18	892.74	15.17	92.09	17.41

[1] Malarial fever intermittent only. [2] Includes tuberculosis of the larynx. [3] Includes pericarditis and endocarditis. [4] Diseases of the skin proper only.

INTERNATIONAL TABLE VII.—*Most important diseases, by arms of service (enlisted men).*

Diseases of the international nosological table.	Absolute numbers. Admissions by arms of service.									Proportionate numbers. Admissions per 1,000 of mean strength.								
	Infantry.	Cavalry.	Coast Artillery.	Field Artillery.	Engineers.	Ordnance.	Signal Corps.	Hospital Corps.	Others.	Infantry.	Cavalry.	Coast Artillery.	Field Artillery.	Engineers.	Ordnance.	Signal Corps.	Hospital Corps.	Others.
1. Alkoholismus acutus, including delirium tremens	445	114	378	50	12	24	21	86	71	15.97	8.69	21.68	9.77	6.87	33.99	17.84	25.24	9.23
2. Appendicitis typhlitis and peri-typhlitis	137	107	98	30	18	5	9	49	63	4.92	8.15	5.62	5.86	10.30	7.08	7.65	14.38	8.19
3. Bronchitas acuta	886	319	487	166	51	24	30	86	541	31.80	24.31	27.93	32.45	29.19	33.99	25.49	25.24	70.32
4. Cholera Asiatica	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. Cholera nostras	.....	.....	3	.....	.....	.....	.....	.....	.....	.....	.....	.17	.....	.....	.....	.....	.....	.....
6. Diphtheria et croup	53	7	4	4	3	.....	1	6	1	1.90	.53	.23	.78	1.72	.....	.85	1.76	.13
7. Dysenteria	167	106	23	12	7	.....	1	15	6	5.99	8.08	1.32	2.35	4.01	.....	.85	4.40	.78
8. Erysipelas	4	7	6	1	.....	1	.....	.....	8	.14	.53	.34	.20	.....	1.42	.....	.....	1.04
9. Febris intermittens (malaria [1])	1,050	437	204	234	127	4	8	63	180	37.69	33.30	11.70	45.74	72.70	5.67	6.80	18.49	23.39
10. Febris recurrens	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. Fractura ossium	294	225	167	95	30	5	13	27	82	10.55	17.15	9.58	18.57	17.17	7.08	11.04	7.92	10.66
12. Gonorrhea	2,622	1,082	1,131	458	128	13	49	177	548	94.11	82.46	64.86	89.52	73.27	18.41	41.63	51.95	71.23
13. Hernia	101	47	49	12	6	4	.....	15	65	3.63	3.58	2.81	2.35	3.43	5.67	.....	4.40	8.45
14. Influenza	411	207	331	101	19	44	15	70	64	14.75	15.78	18.98	19.74	10.88	62.33	12.74	20.54	8.32
15. Insolatio (Hitzschlag, coup de chaleur)	2	.....	1	.....	1	.....	.....	.....	1	.07	.....	.06	.....	.57	.....	.....	.....	.13
16. Luxationes articulorum	83	55	40	24	3	1	1	4	20	2.98	4.19	2.29	4.69	1.72	1.42	.85	1.17	2.60
17. Meningitis cerebro-spinalis epidemica	2	1	1	4	.....	.....	.....	.....	5	.07	.08	.06	.78	.....	.....	.....	.....	.65
18. Morbilli	147	8	70	4	6	1	7	12	253	5.28	.61	4.01	.78	3.43	1.42	5.95	3.52	32.89
19. Parotitis epidemica	451	82	198	104	26	.....	3	17	449	16.19	6.25	11.35	20.33	14.88	.....	2.55	4.99	58.37
20. Pleuritis	101	35	45	16	6	.....	2	20	27	3.63	2.67	2.58	3.13	3.43	.....	1.70	5.87	3.51
21. Pneumonia crouposa sive lobaris	65	24	31	7	4	1	3	7	36	2.33	1.83	1.78	1.37	2.29	1.42	2.55	2.05	4.68

[1] Malarial fever, intermittent only.

INTERNATIONAL TABLE VII.—*Most important diseases, by arms of service (enlisted men)*—Continued.

Diseases of the international nosological table.	Absolute numbers. Admission by arms of service.									Proportionate numbers. Admissions per 1,000 of mean strength.								
	Infantry.	Cavalry.	Coast Artillery.	Field Artillery.	Engineers.	Ordnance.	Signal Corps.	Hospital Corps.	Others.	Infantry.	Cavalry.	Coast Artillery.	Field Artillery.	Engineers.	Ordnance.	Signal Corps.	Hospital Corps.	Others.
22. Rheumatismus articulorum	257	109	137	64	11	8	5	30	92	9.22	8.31	7.86	12.51	6.30	11.33	4.25	8.81	11.96
23. Scarlatina	2	5	1	.....	.....	.....	.....	2	4	.07	.38	.06	.....	.....	.....	.....	.59	.52
24. Scorbutus	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
25. Syphilis	819	476	473	117	38	6	31	85	179	29.40	36.28	27.12	22.87	21.75	8.50	26.34	24.95	23.27
26. Trachoma	4	1	1	.....	2	.....	.....	.....	17	.14	.08	.06	.....	1.14	.....	.....	.....	2.21
27. Tuberculosis pulmonum [1]	83	33	41	23	6	1	3	20	31	2.98	2.52	2.35	4.50	3.43	1.42	2.55	5.87	4.03
28. Tuberculosis ceterorum organorum	16	5	4	3	1	.....	1	.....	2	.57	.38	.23	.59	.57	.....	.85	.....	.26
29. Typhus abdominalis	8	4	1	1	1	.....	.....	.....	6	.29	.30	.06	.20	.57	.....	.....	.....	.78
30. Typhus exanthematicus	1	.....	.....	.....	.....	.....	.....	.....	.....	.03	.....	.....	.....	.....	.....	.....	.....	.....
31. Ulcus molle	1,079	391	347	164	53	4	23	55	151	38.73	29.80	19.90	32.06	30.34	5.67	19.54	16.14	19.63
32. Variola	3	.....	.....	2	.....	.....	.....	.....	1	.11	.....	.....	.39	.....	.....	.....	.....	.13
33. Morbi auris	178	75	75	26	16	3	7	14	54	6.39	5.72	4.30	5.08	9.16	4.25	5.95	4.11	7.02
34. Morbi cordis [2]	50	13	23	14	3	2	.....	13	27	1.79	.99	1.32	2.74	1.72	2.83	.....	3.82	3.51
35. Morbi cutis [3]	928	401	448	191	57	18	28	51	372	33.31	30.56	25.69	37.33	32.63	25.50	23.79	14.97	48.35
36. Morbi mentis	101	35	58	7	3	1	5	18	42	3.63	2.67	3.33	1.37	1.72	1.42	4.25	5.28	5.46
37. Morbi oculi	265	115	131	52	15	5	7	22	101	9.51	8.76	7.51	10.16	8.59	7.08	5.95	6.46	13.13
38. Morbi systemat., urin et sexual (excluding venerie et syphilis)	272	154	198	63	14	7	4	45	153	9.76	11.74	11.35	12.32	8.02	9.92	3.40	13.21	19.89

[1] Includes tuberculosis of the larynx.

[2] Includes pericarditis and endocarditis.

[3] Diseases of the skin proper only.

Diseases of the international nosological table.	Admissions by months.											
	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.
1. Alkoholismus	110	99	110	83	83	93	51	77	111	123	134	127
2. Appendicitis, typhlitis, and perityphlitis	39	41	39	43	45	40	55	45	43	45	37	44
3. Bronchitis acuta	269	249	307	207	219	176	174	131	147	165	198	348
4. Cholera Asiatica												
5. Cholera nostras								2	1			
6. Diphtheria et croup	23	15	7	4	2	1	2	1	2		20	2
7. Dysenteria	21	21	25	36	31	24	32	42	35	24	18	28
8. Erysipelas	3	6	3	4		2	3		3	1	1	1
9. Febris intermittens (malaria)	107	153	263	263	286	305	254	203	190	155	62	66
10. Febris recurrens												
11. Fractura, ossium	75	58	66	93	78	92	62	77	89	83	86	79
12. Gonorrhœa	664	545	556	499	533	559	588	498	557	484	377	348
13. Hernia	27	25	18	28	25	23	34	18	31	28	22	20
14. Influenza	122	112	140	84	76	48	72	45	53	76	98	336
15. Insolatio (Hitzschlag coup de chaleur)					1	1	1	1	1			
16. Luxationes articulorum	14	15	9	16	19	22	18	22	25	23	25	23
17. Meningitis cerebro-spinalis epidemica	3		1	2	1		1				3	2
18. Morbilli	92	93	92	91	38	27	50	7	1		2	15
19. Parotitis epidemica	86	151	296	341	187	75	50	15	18	10	38	63
20. Pleuritis	18	19	31	25	26	25	23	18	22	14	12	19
21. Pneumonia crouposa sive lobaris	31	18	13	23	15	13	13	6	4	9	7	26
22. Rheumatismus, articulorum	59	78	89	101	57	56	56	46	36	38	38	59
23. Scarlatina		1	5		5						2	1
24. Scorbutus												
25. Syphilis	242	211	228	160	163	174	203	170	172	198	168	135
26. Trachoma	3		2	1	3	3	3	3	1		2	4
27. Tuberculosis pulmonum	30	12	26	18	15	17	16	25	21	18	27	16
28. Tuberculosis ceterorum organorum	3		3	4	2	3	4	5	2	1	2	3
29. Typhus abdominalis	1	2	1	4	2	2	2	2	1	4		
30. Typhus exanthematicus						1						
31. Ulcus molle	258	217	208	197	240	201	186	161	185	184	122	108
32. Variola				1	2			1			1	1
33. Morbi auris	39	43	51	30	53	36	47	35	23	27	31	33
34. Morbi cordis	13	13	12	16	19	10	5	17	9	16	6	9
35. Morbi cutis	220	188	169	179	190	198	276	253	218	230	192	181
36. Morbi mentis	20	22	25	23	19	31	23	23	23	15	22	24
37. Morbi oculi	70	46	47	75	54	65	61	57	62	63	57	56
38. Morbi systemat, urin et sexual (excluding venerie et syphilis)	69	81	80	85	90	65	83	81	68	69	64	75

INTERNATIONAL TABLE IX.—*Deaths by rank, by length of service, and by age.*

Causes of death.	Total number of deaths (enlisted men).		Deaths by rank and length of service.				Deaths by age.					
	Absolute numbers.	Per 1,000 of mean strength.	Noncommissioned officers.	Soldiers in first year of service.	Soldiers in second year of service.	Soldiers in third year of service and beyond.	20 and under.	21 to 25.	26 to 30.	31 to 35.	36 to 40.	41 and over.
Deaths from sickness	189	2.37	45	38	18	88	15	45	33	36	15	45
Soldiers present with troops	135	1.70	31	34	13	57	14	33	24	26	6	32
Soldiers absent from troops	54	.68	14	4	5	31	1	12	9	10	9	13
Accidental deaths	138	1.73	28	32	25	53	5	64	26	21	12	10
Soldiers present with troops	98	1.23	20	21	18	39	5	43	19	13	9	9
Soldiers absent from troops	40	.50	8	11	7	14	....	21	7	8	3	1
Suicides	54	.68	12	14	2	26	1	19	15	12	2	5
Soldiers present with troops	37	.46	7	8	2	20	1	13	11	7	1	4
Soldiers absent from troops	17	.21	5	6	.....	6	....	6	4	5	1	1
Total	381	4.79	85	84	45	167	21	128	74	69	29	60

INTERNATIONAL TABLE X.—*Discharges from the Army for physical disability, temporary or permanent, by rank, length of service, and by age.*

Causes of discharge.	Total discharges (enlisted men).		Rank and length of service.				Age.					
	Absolute numbers.	Per 1,000 of mean strength.	Noncommissioned officers.	Soldiers in first year of service.	Soldiers in second year of service.	Soldiers in third year of service and beyond.	20 and under.	21 to 25.	26 to 30.	31 to 35.	36 to 40.	41 and over.
Physical disability existent prior to enlistment	523	6.57	5	373	88	57	80	292	100	43	7	1
Physical disability incident to service	406	5.10	59	97	68	182	25	175	94	53	30	29
Physical disability not incident to service	140	1.76	14	26	37	63	7	54	40	22	11	6
Total	1,069	13.43	78	496	193	302	112	521	234	118	48	36

Very respectfully,

GEO. H. TORNEY,
Surgeon General, U. S. Army.

The SECRETARY OF WAR.

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ANNUAL REPORTS, WAR DEPARTMENT

FISCAL YEAR ENDED JUNE 30, 1914

REPORT OF THE

SURGEON GENERAL

U. S. ARMY

TO THE SECRETARY OF WAR

1914

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REPORT OF THE SURGEON GENERAL OF THE ARMY.

War Department,
Office of the Surgeon General,
Washington, September 1, 1914.

The Secretary of War.

Sir: I have the honor to submit herewith the annual report upon the work of the Medical Department; this includes a study of the health and sanitary conditions of the Army for the calendar year 1913, and a financial statement for the fiscal year ending June 30, 1914. It seems appropriate here to invite attention to certain matters of interest in this report.

Admission rate.

The admission rate for the American Army in 1913 is 671.18 per 1,000, the lowest on record and a reduction over the previous year of over 18 per cent. Chart A, page 19, shows graphically the progressive improvement in this rate for the decade. The admission rate is also lower for all troops in all of our foreign possessions. For the United States this rate for disease only is 487.94, about one-half of the best rate prior to the War of 1898, and before our troops were exposed to the infection of tropical diseases. This rate for disease was highest in the Philippines, 776.28, and lowest in Alaska, 354.08.

Noneffective rate.

The constantly noneffective rate is the true index of the loss of efficiency of the Army from disease and injury. This rate indicates the average number of men in each 1,000 incapacitated for duty each day during the year. For the American Army in 1913 the rate was 25.97, the lowest rate recorded for our Army. Comparing the noneffective rate for disease only for troops in the United States, 18.61, with the best previous rate of the Army, which was 25.23 in 1896, it is observed that there is a reduction of over 26 per cent. This rate is highest in the Philippines, 26.84, and lowest in Alaska, 9.13. Charts B, C, and H show graphically the comparative rates.

Discharge for disability.

For the greater part of 1913 the provisions of General Orders 174, War Department, 1909, have been in effect, and discharges have been made in accordance with its provisions. The rate is slightly lower than for the preceding year.

Deaths.

The death rate is slightly higher than for last year, the increase being due to the accident to the Coast Artillery companies, wrecked while traveling at Burrows Creek, Miss., October 19, 1913, with 17 deaths.

Typhoid fever.

With the satisfactory general rates mentioned, the lower rates for certain diseases are noteworthy. Chart P, page 52, shows graphically the continued progress in stamping out typhoid fever in the Army. Among our troops stationed in the United States, Alaska, the Philippines, Hawaii, Panama, Porto Rico, and China, including the Philippine Scouts and

Porto Rican troops, the total mean strength of which was 90,752, only 4 cases of typhoid fever occurred. Two of these cases were in the persons of recruits of four and five days' service, respectively, who had not yet received the antityphoid prophylactic; a third was a soldier who had received but one dose, instead of the usual three; the fourth a soldier in China, who had received the prophylactic two years previously.

Tuberculosis.

The admission rate for tuberculosis is not quite as low as for the previous year, but is lower than for any year in the decade, except 1912, as is shown by Chart V, page 75.

Venereal diseases.

The campaign of education relative to venereal diseases, which has been carried on in the Army for several years, has been greatly assisted by the act of Congress stopping the pay of those incapacitated by these diseases. Reference to Chart T, page 73, shows the sharp decline in one year of the amount of venereal diseases, a reduction of over 25 per cent. A higher moral standard must accompany such improved conditions. From recent investigation it is, indeed, probable that the frequency of venereal diseases among our soldiers is less than among adult males in the cities of this country.

The economy to the Government effected by these recent measures is worthy of note. At the rate prevalent in 1909, when this propaganda against venereal disease was beginning to take its present form, the expectation for the number of days lost in 1913 in the Army by sickness through venereal diseases would be 391,000; the number actually lost in 1913 was 137,882; an apparent saving of 253,118 days resulted for the year. The time saved was available for military training and other duty. The monetary value was approximately $19[illegible],000, and, under the former conditions, this sum actually would have been paid out by the Government.

At date of writing it is probable that one and a half million men are under arms in the armies of the Allies in France. Applying the same rates to those armies, it would mean a saving of 4,2[illegible],000 days in a year, or the equivalent of an army of 42[illegible],000 for 10 days. The value of the services of men thus saved to duty is apparent.

Alcoholism.

The rate which indicates the prevalence of alcoholism in the Army is lower for 1913 than any ever recorded.

Malarial fevers.

It is especially satisfactory, in view of the extension of white races toward the tropics, to state that the rates for malarial fevers are the lowest since 1898, when our troops were first permanently stationed in the tropics. Chart U shows the progressive lowering of the rate for malarial diseases during the decade.

Camp sanitation.

The necessity that a large part of the Army has been under for the past year of living in camps has given further opportunity to assure ourselves of the fact that we can maintain a state of hygienic competence warranting the holding of large bodies of troops in camp indefinitely.

In this, my first, annual report it seems proper to briefly set forth some of the more urgent needs of this Department, that it may continue to efficiently perform its part in the military organization.

Hospital Corps.

The Hospital Corps needs to be made more attractive; there is little inducement in the pay to draw to it the men of intelligence that are necessary to perform efficiently its specialized duties; anesthetists, pharmacists, surgical, laboratory, and sanitary assistants, expert nurses and cooks can get better pay

and hours out of the Army. The reorganization of the Hospital Corps is essential, if its efficiency is to be preserved.

Field sanitary service.

The organization of several new field hospital and ambulance companies during 1914 only in part remedies the glaring defect observed in the shortage of mobile sanitary units. Our present personnel permits only one-half of the Regular Army in the field to be served by the sanitary units prescribed by Field Service Regulations. In view of the great battle losses to be expected in modern wars, it is a serious responsibility to rely upon improvised units that must serve at the front. This matter does not require congressional action.

The great reduction in the amount of preventable disease foreshadows great economies to the Government as practical application is developed. Until comparatively recently the duties of medical officers were almost entirely confined to the care of the sick and wounded. In keeping with modern tendencies, specialization has developed and to their former duty is now added that of sanitary science with the practice of preventive medicine in the field and garrison, the handling and disposal of the sick and wounded in campaign, and the various specialties of the civilian physician and surgeon. All this requires preparation and training unknown in past years. The Medical Corps is the only portion of the Army not included in the plan of education of the Army instituted when Senator Root was Secretary of War.

It seems time that a comprehensive scheme was adopted to keep medical officers trained and abreast of the times in both their medico-military and strictly professional duties.

For some years it has been necessary to constantly employ from 90 to 100 members of the Medical Reserve Corps with troops. It is desirable that the Medical Corps be large enough to perform all the duties required in peace, and any reserve of trained medical officers be effected in other ways. In time of war there will be demands for medical officers that the corps will be unable to meet. A sufficient number to meet requirements in peace is the best preparation to meet the demands upon the medical department in mobilization and war.

Appeals are made during great public disasters for the services of medical officers and for medical property by the National Red Cross. It is desirable that plans be perfected whereby they may become available through the authority of the Secretary of War. Legislative enactment is necessary to modify the present restrictions upon granting this help.

HEALTH OF THE ARMY.

International Nomenclature.

This is the second annual report of this office in which the diagnostic terms for diseases and injuries, adopted by the Medical Department in accordance with the International Nomenclature, are used with the international numbers. The nomenclature was published in C. M. M. D., December 7, 1911, for the information and guidance of all medical officers.

The International Nomenclature is used by most of the important foreign countries. It is also used by the Census Bureau in this country and by an increasing number of boards of health and large hospitals.

In studying statistics for other countries where the terms used are expressed in a foreign language, the international number furnishes a ready key for their interpretation.

On page 288 and following will be found 10 tables giving the military statistics for the year 1913, as agreed upon at the International Commission for the Unification of the Medical Statistics of Armies, held at Budapest in 1894, at Madrid in 1903, and modified by the last meeting held at Berlin in 1907. The diagnostic terms and numbers used in these tables are those agreed upon by the commission, and are not to be confused with the terms and number of the International Nomenclature used in the remainder of this report and based upon the second decennial revision by the international commission held in Paris July 1 to 3, 1909.

Admission Rates.

Prior to 1904 in compiling the statistics of this office for the Army all readmissions which were obviously for the same attack of the same disease were omitted. Thus, if a man was admitted to hospital with a complication of gonorrhea who had been returned to duty a short time before, after treatment for the same attack of this disease, the readmission was not counted. From 1904 to 1911, inclusive (reports 1905–1912), all readmissions were counted as admissions. In compiling the statistics for 1912 and 1913 the rule followed prior to 1904 has been followed. In each recent report a table has been published showing for the Army the difference between the actual number of cases and admissions. In this report in making comparisons between cases and admissions the terms case admission (report 1914 and prior to the one for 1905) and total admission (reports 1905 to 1912, inclusive) will be used.

Table No. 81, page 287, shows the total admission and case admission rates for the Army, for the United States, continental (exclusive of Alaska), and for American troops in the Philippine Islands for diseases, external causes, and all causes separately for each year, 1904 to 1911, inclusive.

Table No. 68½ appears for the first time in this report. It gives the rates per 1,000 for the entire Army. So much interest has been shown concerning the incidence of certain diseases for the entire Army—that is, for all officers and enlisted men both American and

native troops—that it was deemed advisable to publish this table. Especial interest has been shown in the rates for tuberculosis, typhoid fever, and the venereal diseases.

OFFICERS.

The mean strength of officers was 4,296, as obtained from the reports of sick and wounded of the Medical Department, and 4,787 from the office of The Adjutant General. There were 2,222 admissions, 28 deaths, and 102.7 constantly noneffective from all causes, equal to ratios of 517.23, 5.85, and 23.83 as compared with ratios of 596.78, 5.12, and 24.92 per 1,000 for the year 1912. The constantly noneffective rate was lower than for 1912, the admission rate much lower, and the death rate higher.

The chief causes of admission and their rates were diarrhea and enteritis, 42.60; influenza, 42.37; bronchitis, 30.49; diseases of the pharynx, 30.49; diseases of the nasal fossæ, 21.18; diseases of the stomach (ulcer and cancer excepted), 16.76; appendicitis, 14.20; and malaria, 13.73.

OFFICERS RETIRED.

Thirty-six officers were retired on account of disability during the year, making a rate for retirement for disability of 7.52 per 1,000 as compared with 4.69 for 1912. The discharge rate for disability in enlisted men was 13.24.

The following table shows the principal causes for which retirements were made and the rank and age of the officers retired. The increase over last year is almost evenly divided between the field grades and those below.

TABLE No. 1.—*Retirement of officers, United States Army, year 1913, for disability, by causes and rank, grouped by ages.*

CAUSE OF RETIREMENT.	Total.		Ages of officers, quinquennial groups.								
	Number.	Ratio per 1,000 of all officers.	24 years and under.	25 to 29 years.	30 to 34 years.	35 to 39 years.	40 to 44 years.	45 to 49 years.	50 to 54 years.	55 to 59 years.	60 years and over.
Organic heart disease	6	1.25						1	2	2	1
Bright's disease, chronic	6	1.25		1			1	1	1	1	1
Mental alienation	5	1.04		1	2		2				
Pulmonary tuberculosis, chronic	2	.42					1	1			
Locomotor ataxia	2	.42				1	1				
Hyperthyroidism	2	.42					1	1			
Enteroptosis	2	.42				1	1				
Malarial poisoning, chronic	1	.21						1			
Otitis media chronic and partial deafness	1	.21									1
Arteriosclerosis and neurasthenia	1	.21							1		
Thrombosis	1	.21				1					
Thrombo-phlebitis, result of typhoid	1	.21				1					
Bronchial asthma, chronic	1	.21				1					
Gastritis, chronic anginoid attacks	1	.21							1		
Abdominal adhesions following general peritonitis	1	.21					1				
Nephrolithiasis	1	.21								1	
Flat foot and chronic otitis media	1	.21					1				
Lame back from old injury	1	.21								1	

TABLE No. 1.—*Retirement of officers, United States Army, year 1913, for disability, by causes and rank, grouped by ages*—Continued.

	Total.		Ages of officers, quinquennial groups.								
	Number.	Ratio per 1,000 of all officers.	24 years and under.	25 to 29 years.	30 to 34 years.	35 to 39 years.	40 to 44 years.	45 to 49 years.	50 to 54 years.	55 to 59 years.	60 years and over.
RANK OF SERVICE.											
Brigadier general	1	.21									1
Colonel	6	1.25							1	4	1
Lieutenant colonel	3	.63							2	1	
Major	3	.63						2	1		
Captain	15	3.13				3	7	3	1		1
First lieutenant	5	1.04		2	1	1	1				
Second lieutenant	2	.42			1	1					
Chaplain	1	.21					1				
Number of retirements	36	7.52		2	2	5	9	5	5	5	3
Number of officers in service	4,787		287	995	909	1,076	692	413	206	154	55
Ratio per 1,000 of each group				2.01	2.20	4.65	13.01	12.11	24.27	32.47	54.55

There were 28 deaths with a rate of 5.85 per 1,000, as compared with 24 deaths with a rate of 5.12 in 1912.

The following table shows the causes of deaths of officers:

TABLE No. 2.—*Deaths of officers, United States Army, year 1913, by causes and rank, grouped by ages.*

	Total.		Ages of officers, quinquennial groups.								
	Number.	Ratio per 1,000 of all officers.	24 years and under.	25 to 29 years.	30 to 34 years.	35 to 39 years.	40 to 44 years.	45 to 49 years.	50 to 54 years.	55 to 59 years.	60 years and over.
CAUSES OF DEATH.											
By fall of aeroplanes	6	1.25		2	4						
Gunshot wounds (suicidal 1, accidental 1, in action 3)	5	1.04			2		1	2			
Drowning, accidental	3	.63		1	2						
Myocarditis, chronic	2	.42				1					1
Bright's disease	2	.42				1	1				
Septicemia	1	.21			1						
Tuberculosis, miliary	1	.21				1					
Carcinoma	1	.21							1		
Psychosis, exhaustive	1	.21								1	
Tumor of brain	1	.21							1		
Angina pectoris	1	.21								1	
Arterial sclerosis	1	.21							1		
Thrombosis	1	.21								1	
Pleurisy	1	.21									1
Appendicitis	1	.21				1					
RANK IN SERVICE.											
Brigadier general	1	.21									1
Colonel	3	.63								3	
Lieutenant colonel	1	.21							1		
Major	4	.84				1			2		1
Captain	9	1.88			3	2	2	2			
First lieutenant	6	1.25		1	4	1					
Second lieutenant	4	.84		2	2						
Number of deaths	28	5.85		3	9	4	2	2	3	3	2
Number of officers in service	4,787		287	995	909	1,076	692	413	206	154	55
Death rate per 1,000 of each group				3.02	9.90	3.72	2.89	4.84	14.56	19.48	36.36

ENLISTED MEN.

The mean enlisted strength of the Army, American troops, white and colored, for the year 1913, as reported on the monthly sick reports of the Medical Department, was 80,766, and on the returns of The Adjutant General's Office, 81,697. The former represents the strength of the commands from which the sick returns were made and was used in calculating all ratios except those for deaths and discharges. As all deaths and discharges were reported, even of those absent from a command, the total strength as obtained from The Adjutant General was used in calculating ratios pertaining to those headings. There was an increase in strength over the year 1912, for which the medical returns showed 78,267 and The Adjutant General's Office 79,613.

During the year 1913 American troops were stationed in the United States proper, the Philippine Islands, China, Alaska, Hawaii, and the Canal Zone. Native troops served in Porto Rico and the Philippines. Statistics for the native troops, Porto Rico and Philippine, have been separately compiled, and when reference is made to the "Army" in this report the American Army proper, white and colored troops, exclusive of native troops, is meant.

Charts A, B, C, D, and E are for the decade 1904–1913. For years prior to 1904 the same data is shown in these charts in the report for 1912, published in 1913. The corresponding historical table was published in the report for 1912, pages 14, 15, and 16.

CONSTANTLY NONEFFECTIVE RATE.

Chart B shows the constant noneffective rate for all causes from the year 1904 to 1913, inclusive. This rate is the true measure of nonefficiency of the Army from sickness and injury. The rate for disease and injury obtained for the total American Army enlisted men for the year 1913 was 24.33, as compared with 30.10 per 1,000 in 1912. The rate for 1913 is thus much lower than the rate for 1912, which was the lowest recorded noneffective rate in the history of the Army before the year 1913. The noneffective rate for disease for 1896 was 25.23, the lowest on record in the Army. The corresponding rate for 1912 was 25.43. For 1913 it is 20.02. The highest noneffective rate on record was for the year 1898, when the total rate was 82.83 per 1,000 and the rate for disease alone was 69.09. The progressive improvement from 1898 to 1911 was chiefly due to the sanitary control of infectious diseases, malarial fevers, typhoid, and dysentery. The very marked improvement in 1913 was due, largely, to the sanitary control of two diseases, typhoid fever and venereal diseases. As a result of the control of typhoid fever by immunization of the Army by the typhoid prophylactic and by the employment of proper sanitary measures, this disease ceases, apparently, to be a factor worthy of consideration as far as noneffectiveness in the Army is concerned. The noneffective rate for venereal diseases showed a continued reduction in 1913; this was a result of the propaganda of education which has been going on for several years, and of General Orders 17, War Department, May 31, 1912, prescribing a compulsory system of venereal prophylaxis and physical

inspection, together with General Orders 31, publishing to the Army the action of Congress in stopping the pay of men disabled on account of sickness due to alcoholism, drug addiction, and other misconduct (venereal diseases).

The diseases causing the highest noneffective rates were venereal diseases and tuberculosis (all). The rate for venereal diseases was 4.51 per 1,000 and that for tuberculosis (all) was 1.94. The noneffective rate for venereal diseases in 1912 was 7.78. The rate for 1913, therefore, as stated above, shows a great reduction. The total rates for venereal diseases are kept up by the rates for troops in the Philippines. While lower there than in 1912, the noneffective rate for white troops is 8.06, over twice the rate (3.55) for white troops in the United States. The colored troops in the Philippines have a rate of 13.36, as compared with 4.53 for these troops in the United States.

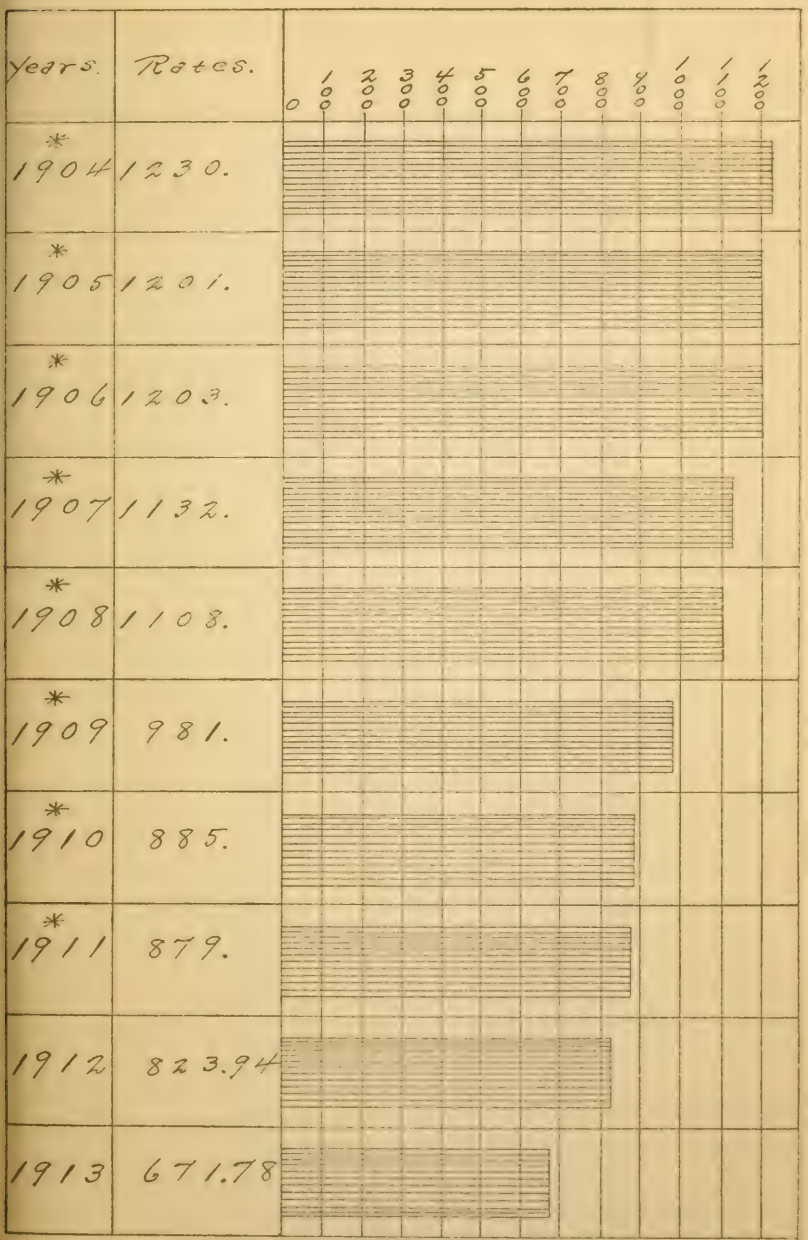
ADMISSIONS TO SICK REPORT.

The admissions to sick report during 1913 show a satisfactory decrease. The rate is 671.78. This is a reduction of over 18 per cent from 1912. The admission rate for diseases only is 535.26. These rates for 1913 are the lowest ever attained in the history of the Army. Table No. 81 shows the case admission and total admission rates for the Army, United States, and American troops, Philippine Islands, 1904 to 1911, inclusive. The highest admission rates were caused by the diseases named, as follows: Venereal, 97.22; diseases of the pharynx, 48.52; diarrhea and enteritis, 31.92; bronchitis, 30.42. The venereal rate was 136.70 for 1912, and the present rate is a most encouraging matter, as it promises further reduction through the measures which, now in force, have accounted for this marked decrease the past year in spite of the many changes in the stations of troops, which have effected unfavorably the systems of prophylaxis carried on at the posts. The rate for white troops was 94.14; for colored, 147.92. The rates in the Philippines for these troops were 140.77 and 194.37, respectively, which are a decrease for both races over the rates of 1912 in the Philippines, 215.43 and 524.06 respectively. These high rates are due to local social conditions and indicate that radical changes in conditions must appear before rates comparable to those in the United States may obtain. As the rate for 1912 for colored troops in the Philippines was 524.06, the highest recorded in the Army, the present rate is an indication of the effectiveness of the measures instituted for the improvement in this condition. In comparing the rates for venereal disease for the past three years with those of periods before General Order 17, War Department, May 31, 1912, was issued, it must be borne in mind that since that time the semimonthly physical inspection brings to light a much larger percentage of the venereal cases than was known to the surgeon before these inspections were compulsory.

The case admission rate for external causes was 136.52. In 1911 this rate was 149.64, and in 1911 was 161. The principal causes for this rate were: Traumatism by fall, 41.04; injuries by animals, 12.06; traumatism by cutting or piercing instruments, 11.76; poisoning by food, 3.06; burns, 4.11; effects of heat, 1.75; and traumatism by firearms, 2.18. Seven men were shot by sentry, with two deaths. Ten were wounded in action with three deaths.

Chart A.

Admission rates, All Causes, for the Army, American Troops {enlisted men} years, 1904-1913.



* Excess of Cases deducted to correspond with years preceding 1904, and 1912-1913.

Chart B.

Noneffective rates, All Causes, for the Army, American Troops {enlisted men} Years, 1904-1913.

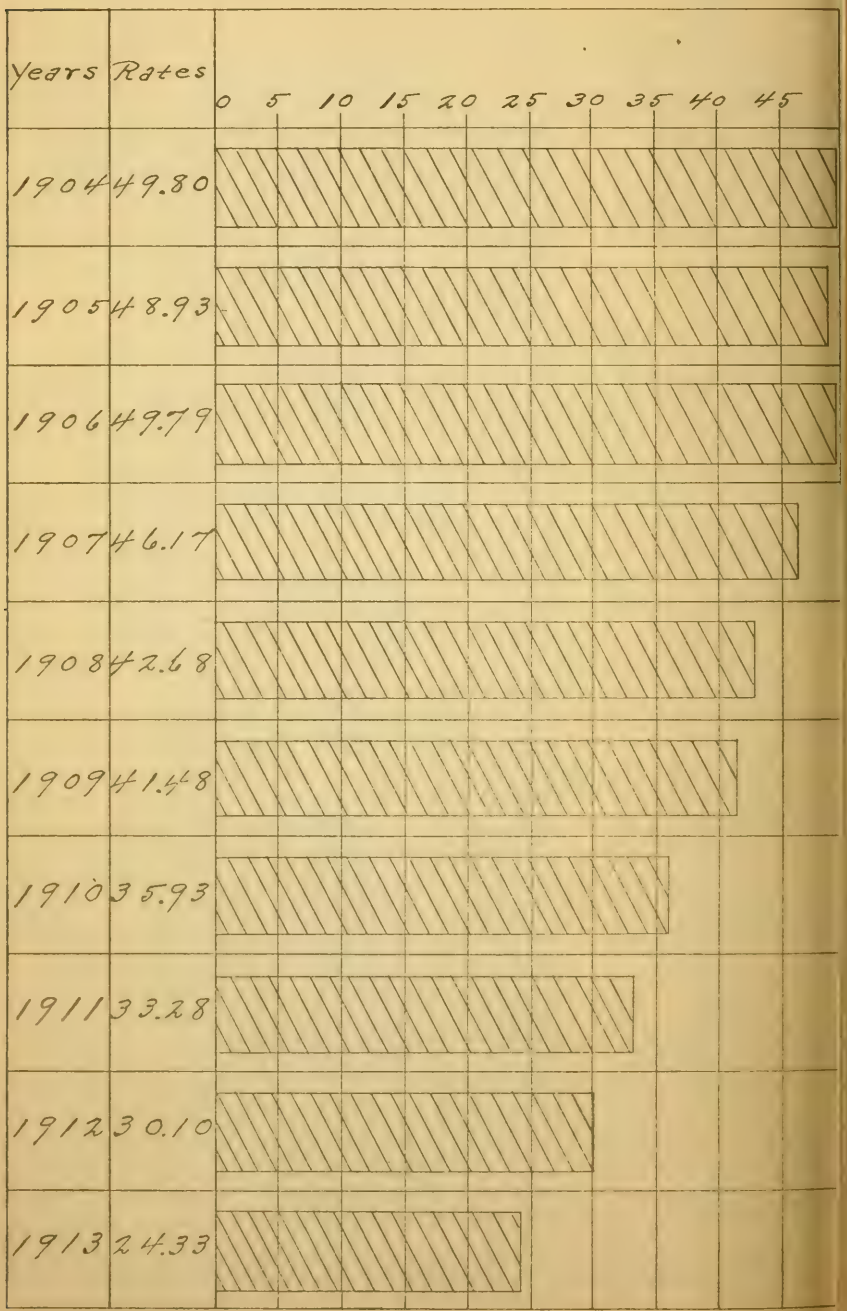
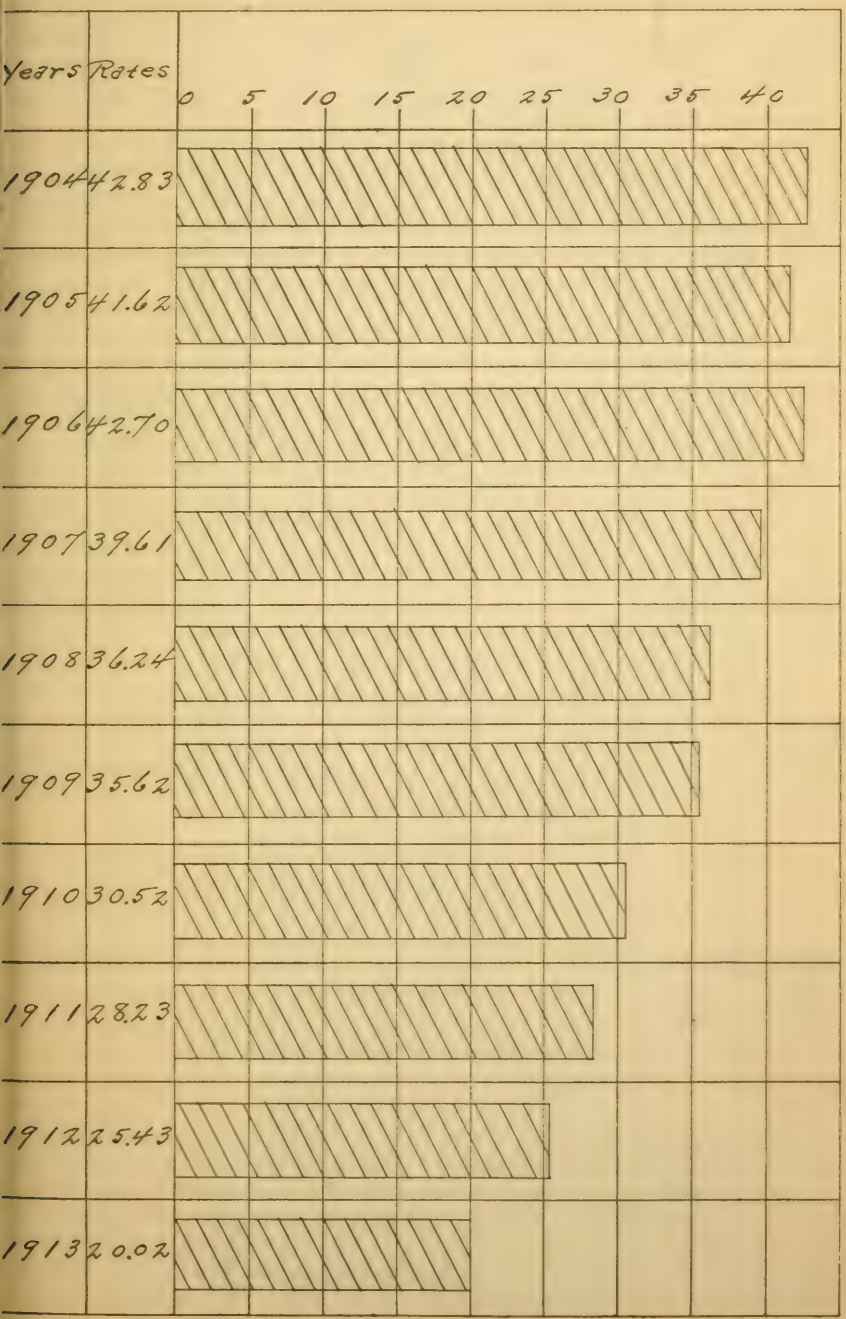


Chart C.

Noneffective rates for Disease for the Army, American Troops {enlisted men} years, 1904–1913.



DISCHARGES FOR DISABILITY.

Chart D gives the rates for discharges for disability for the Army from the year 1904 to 1913, inclusive.

Soldiers stationed outside of the territorial limits of the United States are now brought to the United States for discharge, except those belonging to the Porto Rican regiment and the Philippine Scouts. They are, however, credited in the tabulated reports to the country in which the soldiers were serving when they became disabled if their commands were there at date of discharge.

The present system requires that all soldiers certified by medical officers to be permanently incapacitated for the military service shall be critically examined by a board of two medical officers before being discharged. The reports of these boards go to the department headquarters from where discharges are ordered, except in the cases of soldiers at a recruit depot, or general hospital, and the reports of boards on insane patients. In the latter circumstances the reports are sent to The Adjutant General of the Army, who directs the discharge or issues the order when insane are recommended to be transferred to the Government Hospital for the Insane, Washington, D. C.

By reference to this chart it will be seen that the disability rate for 1913 was lower than for any year since the Spanish-American War, the lowest rates being for the years 1894–1898, inclusive, and for the year 1867. In 1913 there were in the Army 1,082 men discharged for disability, the rate being 13.24 per 1,000. The corresponding rate for the preceding year was 13.43. The rate for 1867 was 13 per 1,000, and the lowest rate from 1894–1898, inclusive was that for 1895, the lowest on record in the Army, 9.15 per 1,000. The highest rate in any year for discharge for disability was in 1849 when the total rate for discharge was 76.7 per 1,000.

The discharge rate for disease in 1913 was 11.93 per 1,000, as compared with 12.18 in 1912, and that for external causes was 1.31 in 1913, as compared with 1.24 in 1912. The diseases causing the highest discharge rate in 1913 were as follows, absolute numbers and rates per 1,000 being given:

Discharges, enlisted men (American troops).

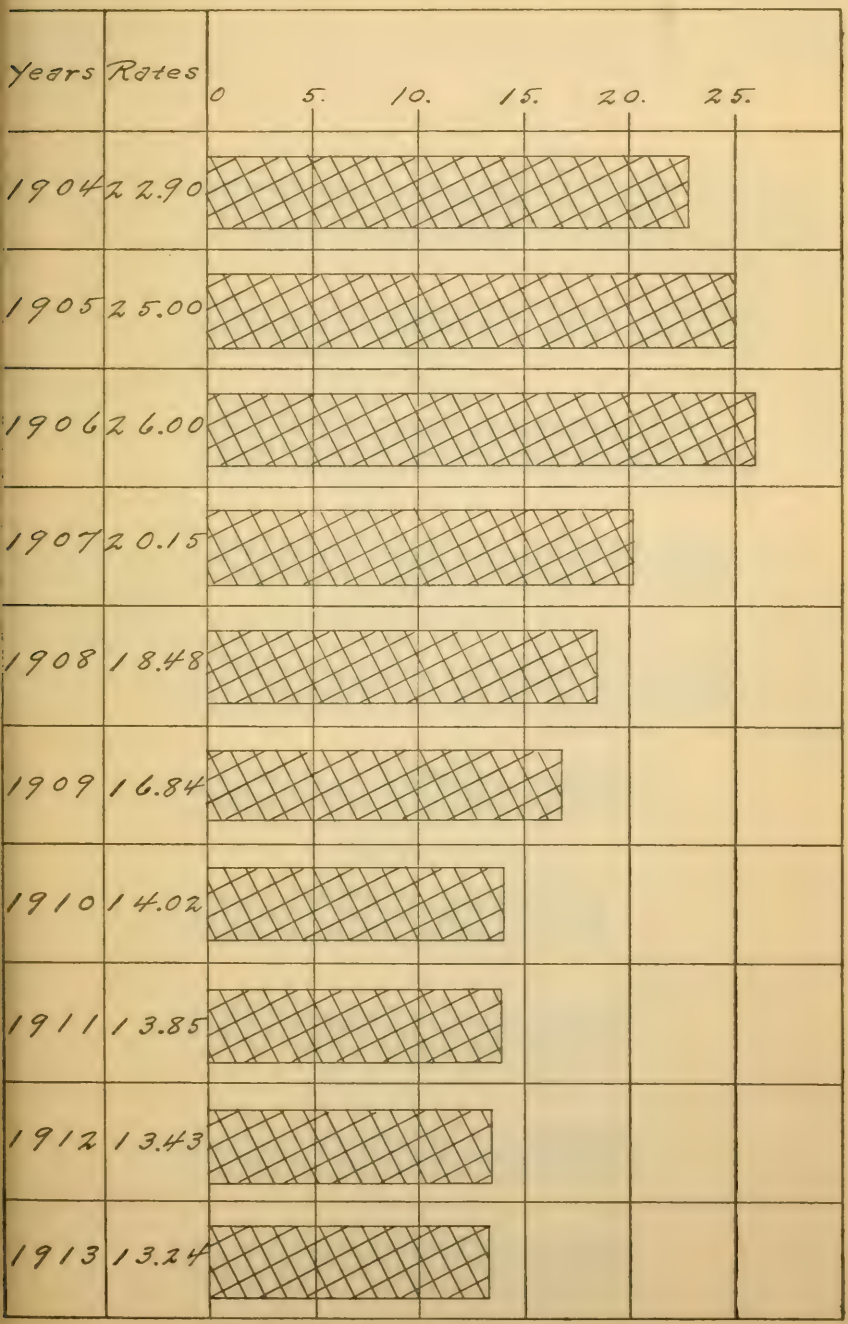
Disease.	Number.	Rate.
Mental alienation	210	2.5
Tuberculosis	185	2.2
Venereal	92	1.1
Flat foot	67	.8
Organic heart disease	34	.4

DEATHS FROM ALL CAUSES.

Chart E shows the total death rate for all causes for the Army from the year 1904 to 1913, inclusive. The total rate for 1913 was 4.86 as compared with the corresponding rate of 4.79 for 1912 and 4.77 for 1911. By reference to the chart it will be seen that the rate for 1910 was the lowest on record in the Army. The highest death rate occurring in any year was in 1849, when the total rate for deaths was 80.2. The highest rate for discharges has been noted for the same year; in

Chart D.

Discharge rates, All Causes, for the Army, American Troops {enlisted men} years, 1904-1913.



1912 it was 13.43. The death rate for this year is higher because of the railroad accident to several companies of Coast Artillery Corps, at Burrows Creek, Miss., in October, 1913.

The death rate for diseases was 2.57 in 1913; in 1912 it was 2.37, which was the lowest on record in the Army, the next lowest being the rate for 1910, which was for the same causes, 2.44. The total number of deaths in 1913 was 397. The following diseases caused the highest number of deaths, absolute numbers and rates per 1,000 being given:

Deaths, enlisted men (American troops).

Disease.	Number.	Rate.
Tuberculosis	40	0.49
Pneumonia, lobar	23	.28
Nephritis, acute and chronic	17	.20
Organic heart disease	15	.18
Epidemic cerebrospinal meningitis	11	.13
Measles	11	.13

The following were the principal causes of deaths from external causes, with the number in each instance: Suicides, 51; drowning, accidental, 35; traumatism by fall, 20; traumatism by other crushing, 51; traumatism by firearms, 13.

INFLUENCE OF STATION ON TROOPS.

Regarding the comparative healthfulness of the various countries in which troops were serving during the year (Army transports being excluded), it will be noted that Alaska maintains the lowest admission and noneffective rates; Hawaii the lowest death rate; and China the lowest discharge rate. The Philippines had the highest admission and noneffective rates; China the highest death rate; and the Canal Zone the highest discharge rate.

Chart E.

Death rates, All Causes, for the Army, American Troops (enlisted men), years, 1904-1913.

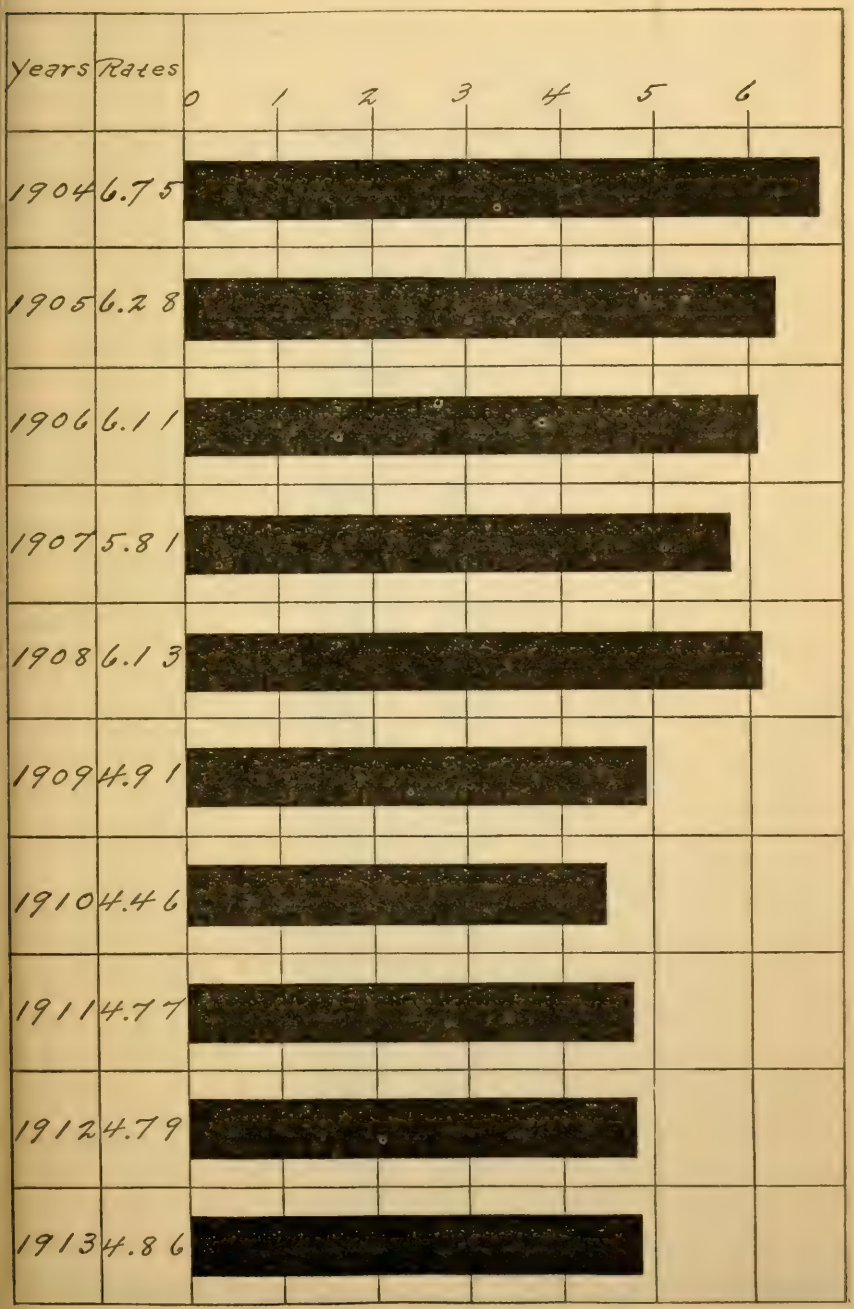


Chart F.

Death, Discharge and Noneffective rates for Disease for the Army, American Troops {enlisted men} years, 1904–1913.

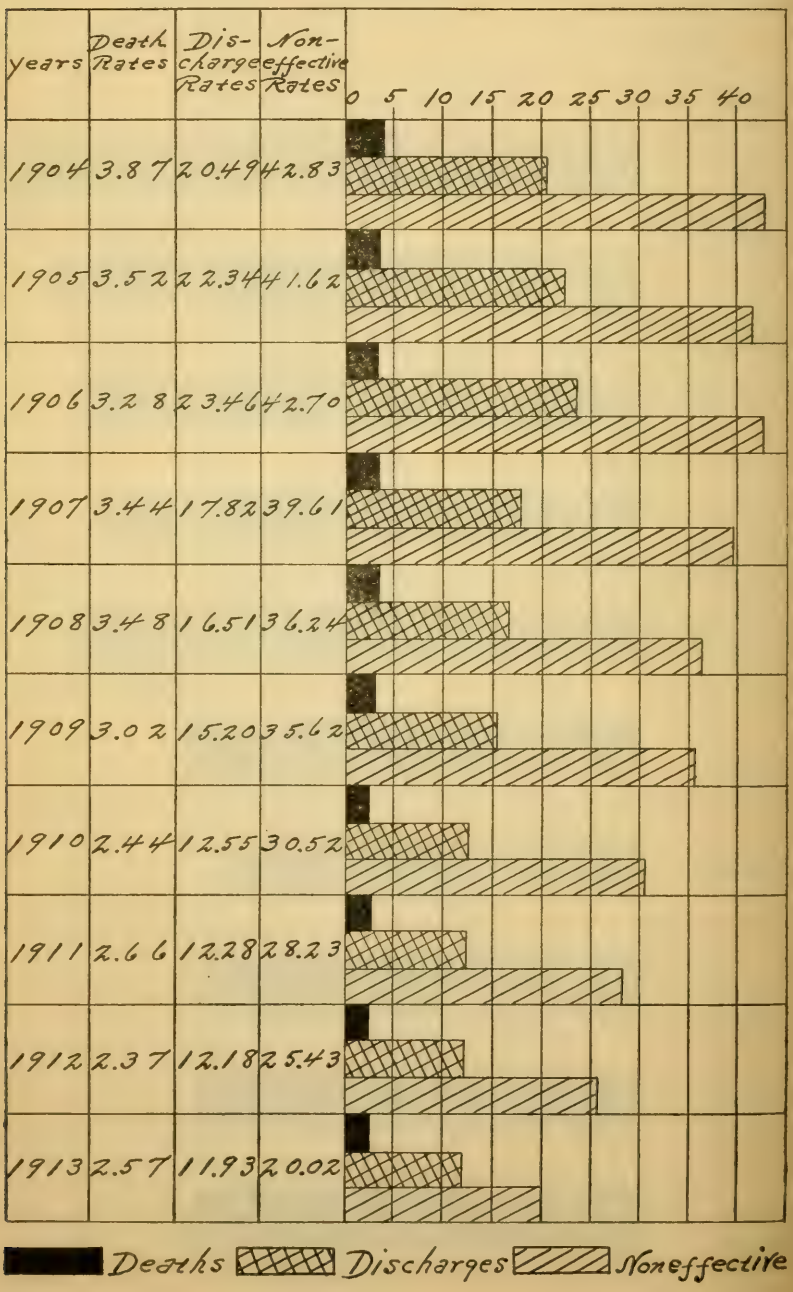


Chart G.

Total Losses, All Causes, for the Army, American Troops {enlisted men} years, 1904-1913.

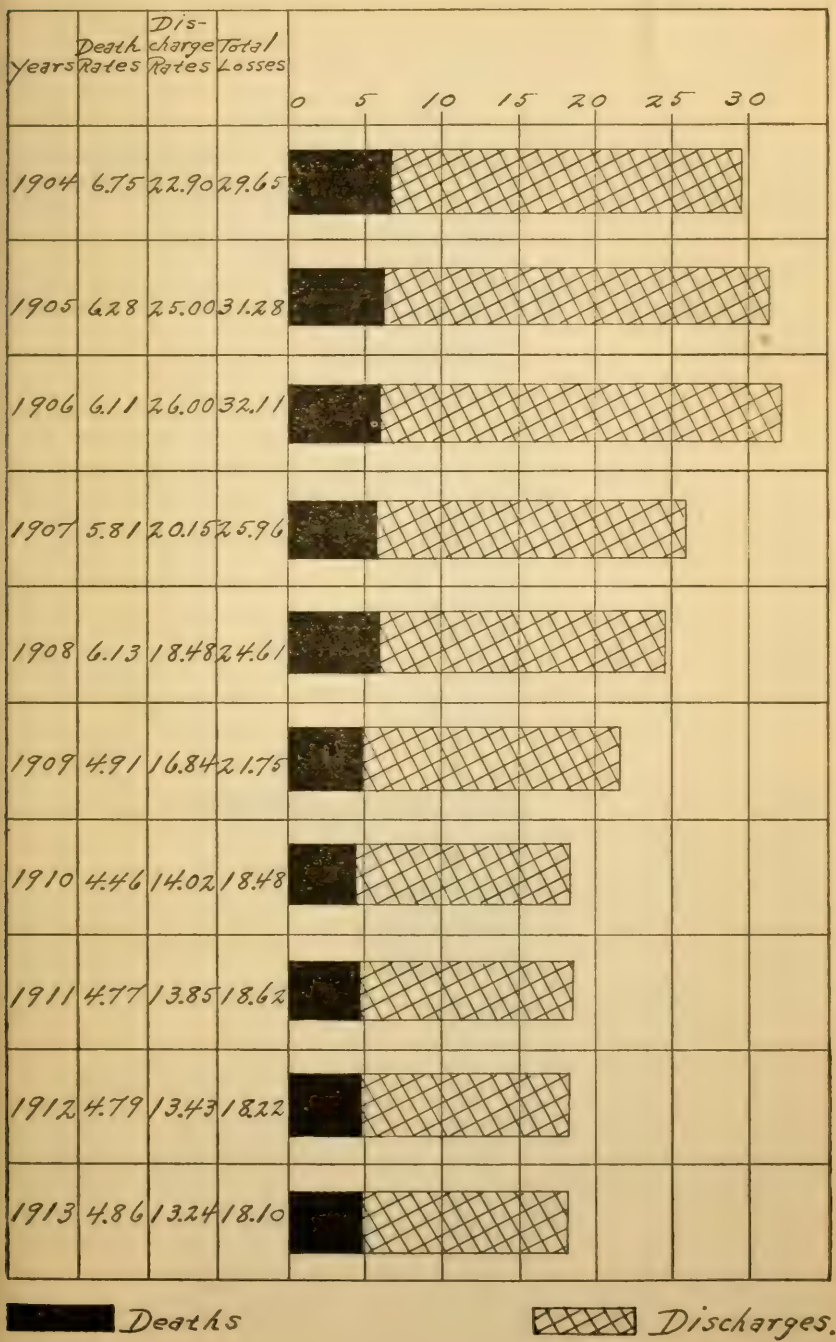


Chart H

Admission, Discharge, Death and Noneffective Rates for Disease, by Countries, American Troops {enlisted men} year, 1913.

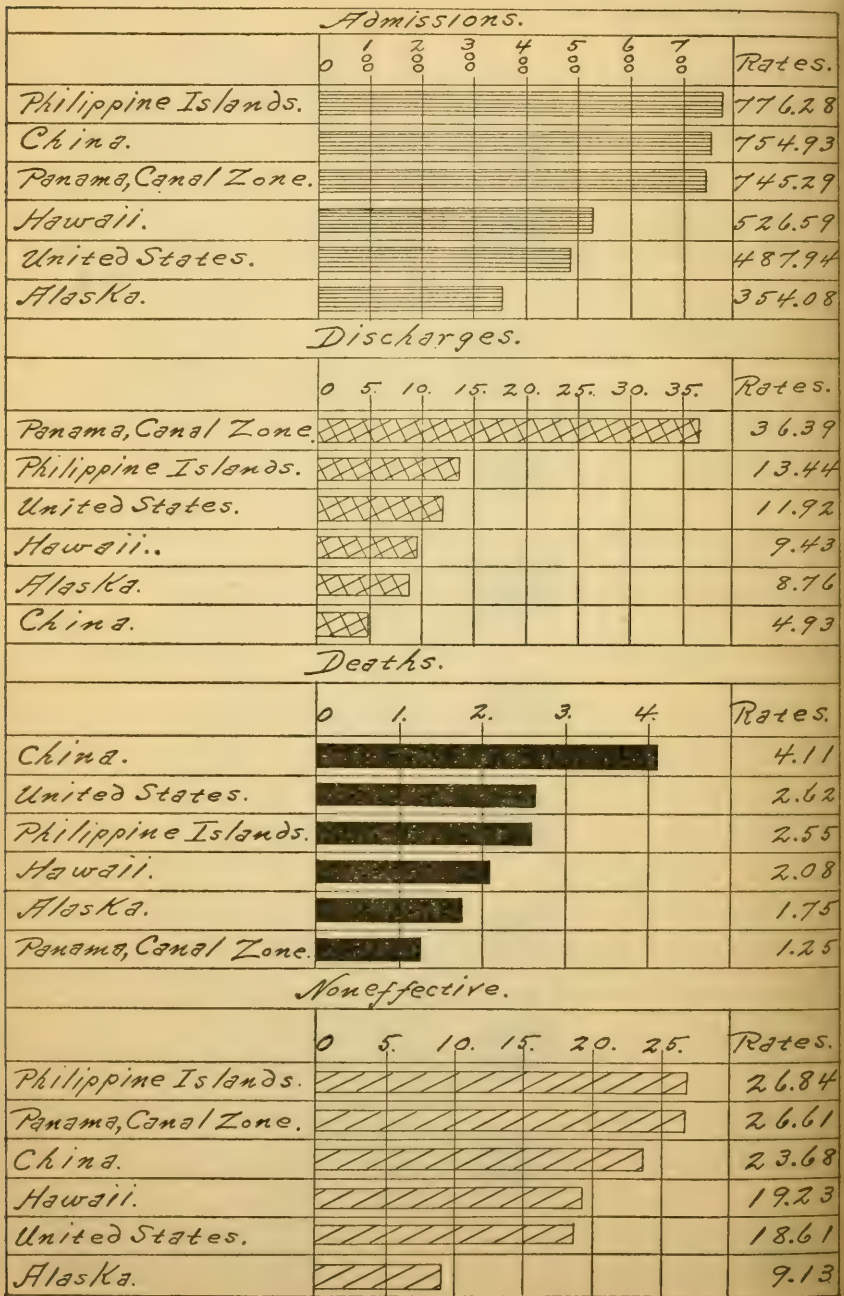


Chart I.

Noneffective rates for certain Special Diseases for the United States and Philippine Islands, American Troops, {enlisted men} year, 1913.

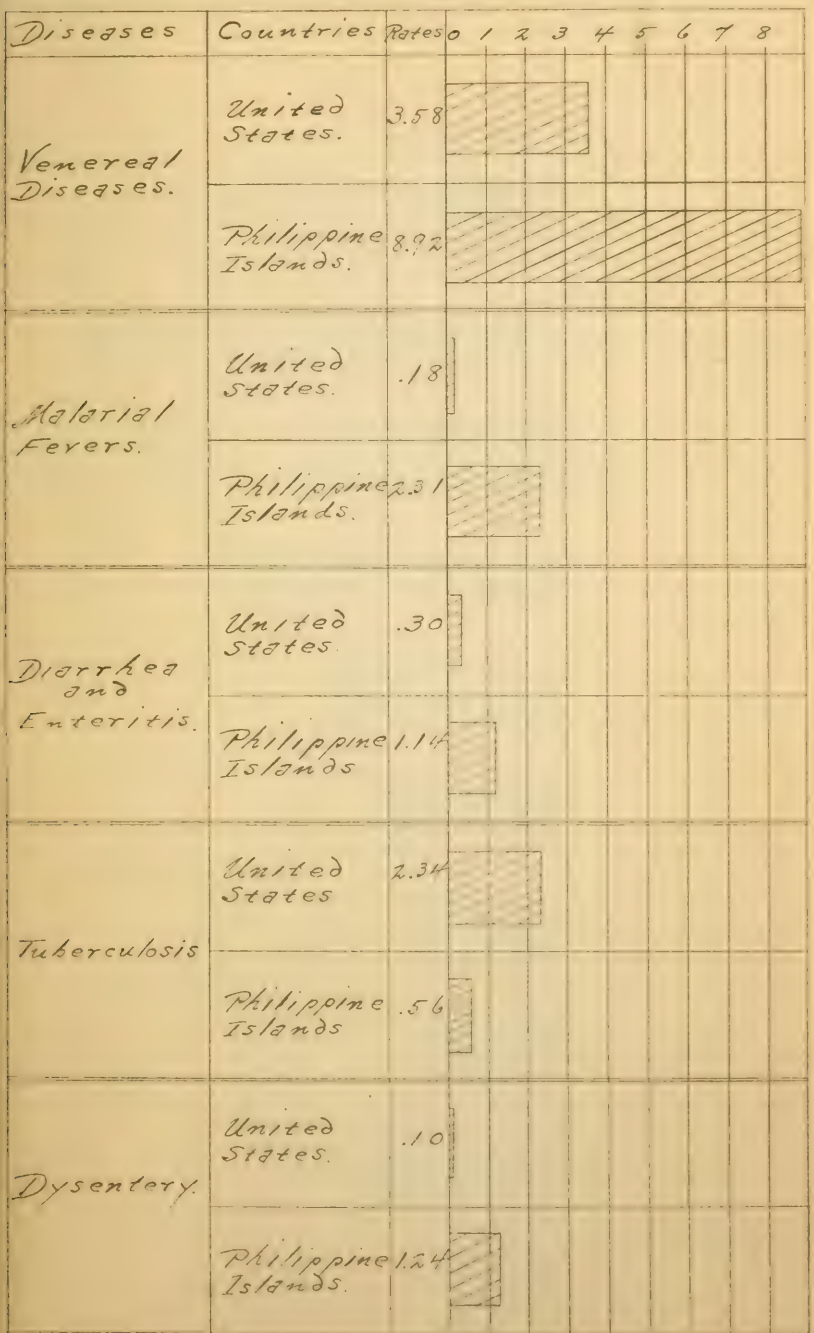


Chart 1[1]
Malarial Fevers.
Admission Rates.
Admission rates for Malarial Fevers for The Army, American Troop {enlisted men} years, 1904-1913.

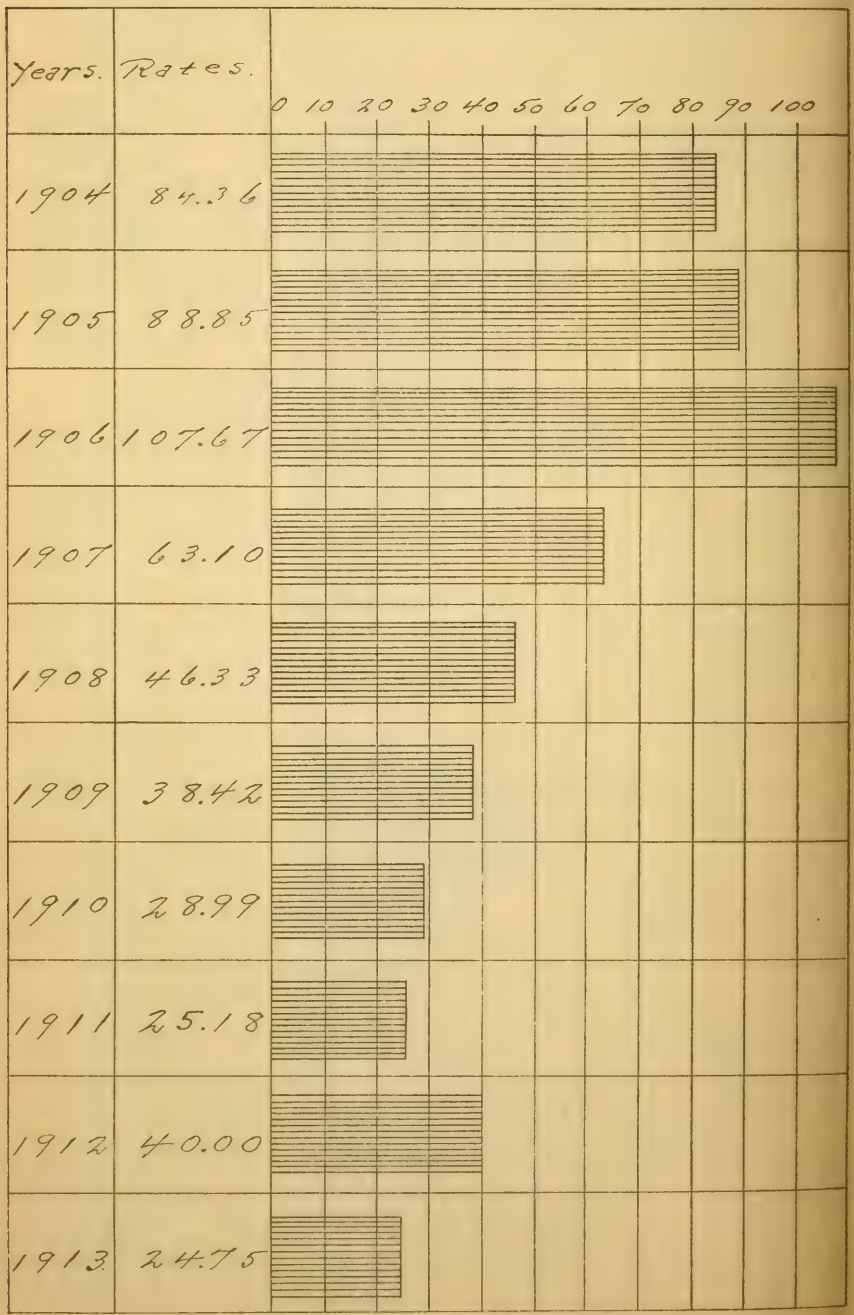


Chart I 2

Malarial Fevers.

Noneffective Rates.

Noneffective rates for Malarial Fevers for The Army, American Troops {enlisted men} years, 1904-1913.

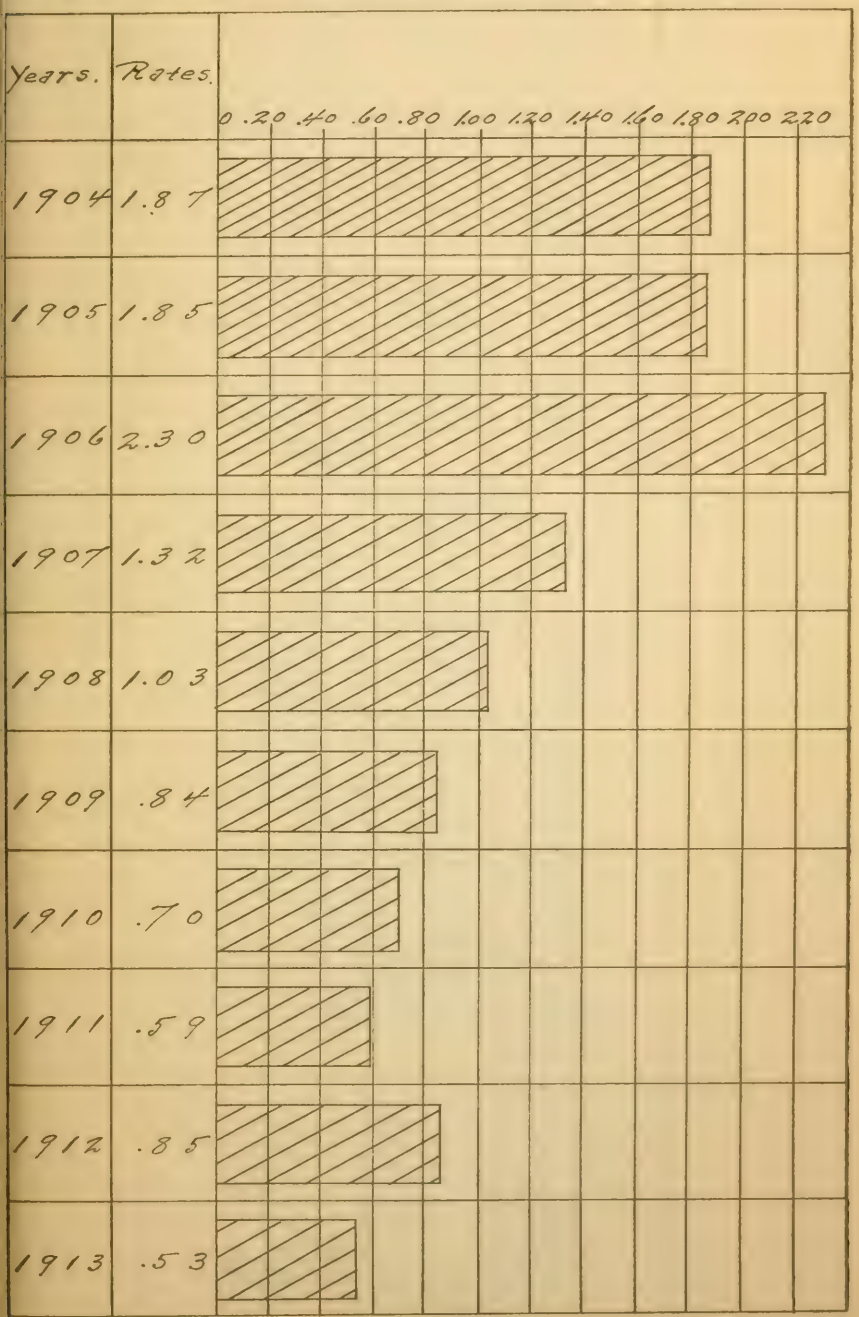


TABLE NO. 3.—*Numerical view of the effect of disease and injury on United States troops, serving at home and abroad, in the year 1913, compared with corresponding data for the year 1912, by countries (enlisted men only).*

ABSOLUTE NUMBERS.

American troops (enlisted men).		Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Noneffective from sickness.	
			Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Days treated.	Constantly noneffective.
United States	1913	59,668	36,951	29,085	7,866	810	718	92	298	158	140	1,108	876	232	499,044	1,367.24
	1912	58,374	43,121	34,846	8,275	865	788	77	272	136	136	1,137	924	213	579,892	1,584.40
Alaska	1913	1,141	565	404	161	11	10	1	5	2	3	16	12	4	5,672	15.54
	1912	1,197	612	426	186	6	6	.....	7	4	3	13	10	3	7,114	19.44
Philippine Islands	1913	11,188	10,316	8,685	1,631	161	153	8	53	29	24	214	182	32	126,241	345.87
	1912	12,357	15,469	13,288	2,121	119	103	16	67	37	30	186	140	46	202,321	552.79
China	1913	1,216	1,108	918	190	6	6	.....	11	5	6	17	11	6	11,942	32.72
	1912	1,097	785	654	131	6	6	.....	8	4	4	14	10	4	10,442	28.53
Hawaii	1913	6,130	4,304	3,228	1,076	63	59	4	23	13	10	86	72	14	54,103	148.23
	1912	3,376	3,161	2,298	863	61	55	6	13	3	10	74	58	16	41,323	112.90
Canal Zone	1913	797	680	594	86	31	29	2	5	1	4	36	30	6	8,793	24.09
	1912	773	616	496	120	12	12	.....	7	1	6	19	13	6	7,848	21.44
Army transports	1913	686	336	317	19	.....	.....	.....	2	2	.....	2	2	.....	11,354	31.11
	1912	1,093	893	767	26	.....	.....	.....	7	4	3	7	4	3	13,281	36.29
Total	1913	**80,766**	**54,257**	**43,231**	**11,026**	**1,082**	**975**	**107**	**397**	**210**	**187**	**1,479**	**1,185**	**294**	**717,149**	**1,964.79**
	1912	78,267	64,487	52,775	11,712	1,069	970	99	381	189	192	1,450	1,159	291	862,221	2,355.80
Regular Army, American troops, 1903 to 1912		65,580	746,308	612,988	133,320	12,658	11,384	1,274	3,913	2,315	1,598	16,571	13,699	2,872	10,203,035	2,793.06
Porto Rican regiment	1913	594	486	434	52	5	4	1	2	2	.....	7	6	1	5,329	14.60
	1912	588	672	610	62	4	4	.....	2	.....	2	6	4	2	6,042	16.51
Philippine Scouts	1913	5,696	3,471	2,983	488	48	45	3	48	14	34	96	59	37	34,050	93.29
	1912	5,497	3,667	3,337	330	45	38	7	24	17	7	69	55	14	40,210	109.86

PROPORTIONATE NUMBERS.

[Ratio per 1,000 of mean strength.]

American troops (enlisted men).	Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Constantly noneffective.	Days treated.	
		Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.		Each soldier.	Each case.
United States	1913	59,608	619.90	487.94	131.96	13.45	11.92	1.53	4.95	2.62	2.33	18.40	14.54	3.86	22.94	8.37	13.51
	1912	58,374	738.70	596.94	141.76	14.48	13.19	1.29	4.55	2.28	2.28	19.03	15.47	3.57	27.15	9.93	13.45
Alaska	1913	1,141	495.18	354.08	141.10	9.64	8.76	.88	4.38	1.75	2.63	14.02	10.51	3.51	13.62	4.97	10.04
	1912	1,197	511.28	355.89	155.39	5.01	5.01	.....	5.85	3.34	2.51	10.86	8.35	2.51	16.24	5.94	11.62
Philippine Islands	1913	11,188	922.06	776.28	145.78	14.14	13.44	.70	4.66	2.55	2.11	18.80	15.99	2.81	30.91	11.28	12.24
	1912	12,357	1,246.99	1,075.34	171.64	9.63	8.34	1.29	5.42	2.99	2.43	15.05	11.33	3.72	44.74	16.37	13.13
China	1913	1,216	911.18	754.93	156.25	4.93	4.93	.....	9.05	4.11	4.93	13.98	9.04	4.93	26.91	9.82	10.78
	1912	1,097	697.36	596.18	101.19	5.47	5.47	.....	7.29	3.65	3.65	12.76	9.12	3.65	26.01	9.52	13.65
Hawaii	1913	6,130	701.63	526.59	175.04	10.07	9.43	.64	3.67	2.08	1.60	13.74	11.51	2.24	24.18	8.63	12.58
	1912	3,376	936.32	680.69	255.63	18.07	16.29	1.78	3.85	.89	2.96	21.92	17.18	4.74	33.44	12.24	13.08
Canal Zone	1913	797	853.20	745.29	107.90	38.90	36.39	2.51	6.27	1.25	5.02	45.17	37.64	7.53	20.23	11.03	12.93
	1912	773	796.90	641.66	155.24	15.52	15.52	.....	9.06	1.29	7.76	24.58	16.81	7.76	27.74	10.15	12.74
Army transports	1913	686	489.80	462.10	27.70	.....	.....	.....	2.92	2.92	.....	2.92	2.92	.....	45.35	.....	.....
	1912	1,093	734.68	701.74	32.94	.....	.....	.....	6.40	3.66	2.74	6.40	3.66	2.74	33.20	12.15	16.54
Total	1913	**80,766**	**671.78**	**535.26**	**136.52**	**13.24**	**11.93**	**1.31**	**4.86**	**2.57**	**2.29**	**18.10**	**14.50**	**3.60**	**24.33**	**8.88**	**13.22**
	1912	78,267	823.90	674.29	149.64	13.43	12.18	1.24	4.79	2.37	2.41	18.21	14.55	3.65	30.10	11.02	13.37
Regular Army, American troops, 1903 to 1912		65,580	1,138.00	934.71	203.29	18.97	17.06	1.91	5.86	3.47	2.39	24.83	20.53	4.30	42.59	15.56	13.67
Porto Rican troops	1913	594	818.18	730.64	87.54	8.42	6.73	1.68	3.37	3.37	.....	11.79	10.10	1.68	24.58	8.97	10.97
	1912	588	1,142.86	1,037.41	105.44	6.80	6.80	.....	3.40	.....	3.40	10.20	6.80	3.40	17.47	10.28	8.99
Philippine Scouts	1913	5,096	681.12	585.36	95.76	9.17	8.59	.57	9.17	2.67	6.49	18.34	11.27	7.07	18.31	6.68	9.81
	1912	5,407	678.20	617.16	61.04	8.19	6.92	1.27	4.37	3.09	1.27	12.56	10.01	2.54	20.32	7.44	10.96

INFLUENCE OF ARMS OF SERVICE.

The enlisted men of the Ordnance Department and Signal Corps are not considered in Table No. 4 on account of their small number and the special character of their service.

The admission rate was highest for the Field Artillery, 804.89, and the lowest for the Hospital Corps, 495.32; the death rate was highest in the Hospital Corps, 5.89, and lowest in the Ordnance, 2.77.

The following table shows the relative frequency of the occurrence of the more important diseases for the various arms of the service, figure 1 indicating the highest ratio and figure 6 the lowest in each case for each arm:

TABLE No. 4.—*Relative frequency of occurrence of certain important diseases, by arms of service, in the Army, among American troops, enlisted men, year 1913.*

Arms of service.	Most important diseases.											
	Venereal.	Tonsillitis and pharyngitis.	Diarrhea and enteritis.	Malaria.	Bronchitis.	Alcoholism.	Rheumatism, articular.	Dysentery.	Tuberculosis.	Typhoid fever.	Pneumonia (lobar).	Injuries.
Cavalry	3	1	1	5	2	6	5	2	6	.....	1	2
Field Artillery	2	2	2	2	1	5	6	3	4	.....	6	1
Coast Artillery	4	3	6	6	6	2	2	6	3	1	3	3
Infantry	1	4	3	3	3	3	1	1	2	2	2	4
Engineers	5	5	5	1	5	4	4	5	5	.....	4	5
Hospital Corps	6	6	4	4	4	1	3	4	1	.....	5	6

The following tabulation shows the admission rates for the different troops for eight of the more important causes of nonefficiency:

Admission rates for diseases causing greatest amount of nonefficiency.

	Venereal diseases.	Alcoholism.	Tuberculosis.	Dysentery.	Rheumatism.	Diarrhea and enteritis.	Mental alienation.	Malarial fevers.
White enlisted men	94.14	15.60	3.43	3.86	6.88	31.65	3.49	25.07
Colored enlisted men	147.92	6.05	7.56	3.24	4.97	36.28	2.59	19.44
Porto Rican native troops	77.44	3.37	11.78	8.42	3.37	69.02	.00	31.99
Philippine Scouts	36.30	.20	6.28	7.06	3.73	21.59	.39	193.49

It will be seen by the above tabulation that the white troops have, as usual, the highest rate for alcoholism; the Philippine Scouts the highest rate for malaria, probably due to the intimate participation in the native life, which takes them more out of the barracks; the colored troops have the highest venereal rate. By far the highest rate for tuberculosis is that for Porto Rican troops.

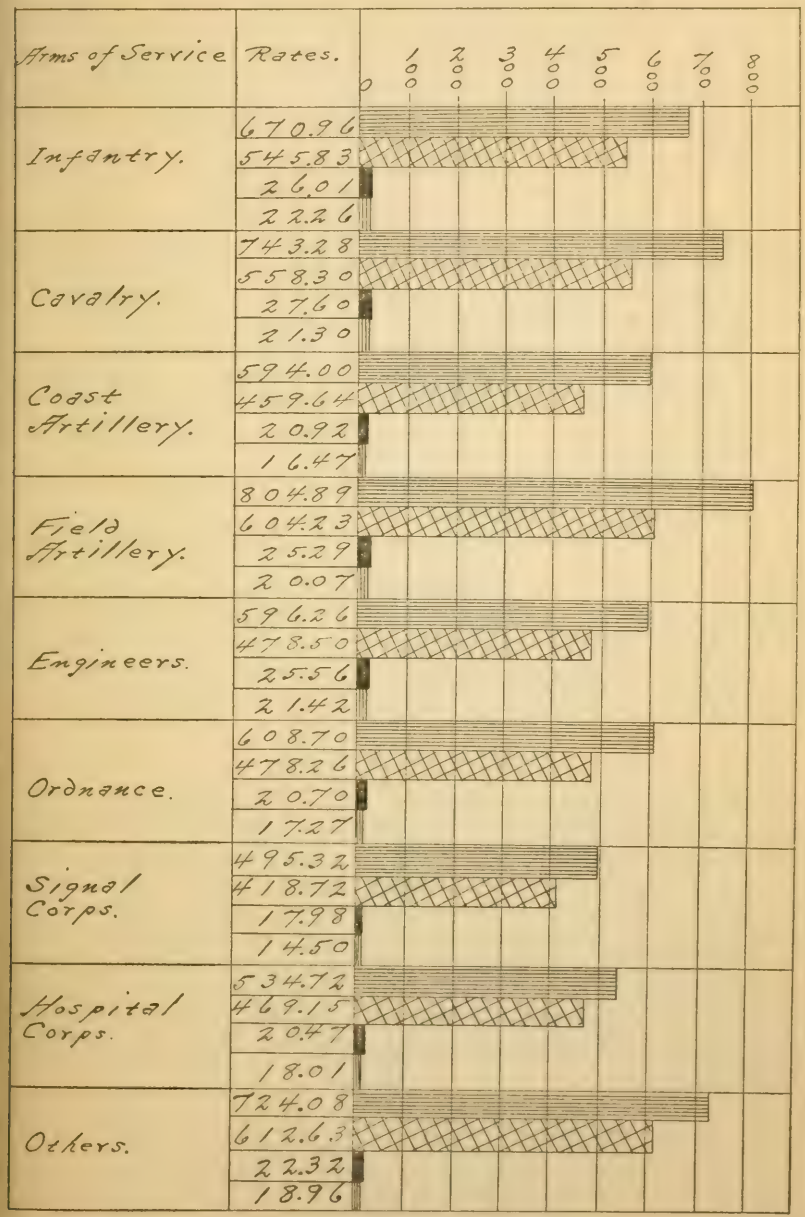
INFLUENCE OF RACE.

[See Tables 67 and 70.]

The tables show that the colored troops had the highest noneffective and the second highest death rates; the Porto Rican troops had the highest admission rate and the lowest death rate. The

Chart K.

Admission and Noneffective rates for All Causes, and Disease for the Army, American Troops, enlisted men, by Arms of Service, year, 1913.



white troops had the highest discharge and the lowest admission rates; and the Philippine troops had the highest death rate. The constant noneffective rates were, colored, 30.27; white, 23.97; Philippine, 18.31; Porto Rican, 24.58. The case admission rates were, Porto Rican, 818.18; colored, 760.10; white, 666.41; Philippine, 681.12. The discharge rates were, white, 13.25; Philippine, 9.17; colored, 13.17; Porto Rican, 8.42. The death rates were, colored, 5.83; white, 4.80; Philippine, 9.17; Porto Rican, 3.37. The rates for total losses were, white, 18.05; colored, 19; Philippine, 18.34; Porto Rican, 11.79. The average number of days lost for each case treated was, white, 13.13; colored, 14.54; Philippine, 9.81; Porto Rican, 10.97.

COMPARISON WITH FOREIGN ARMIES.

It has been customary to make an effort to compare the health conditions in the United States Army with the same conditions in the armies of Great Britain, the continental powers, and Japan. It is doubtful whether any comparisons made from the data furnished this office in the health reports from the countries mentioned are of any value. The conditions under which the sick are treated and records made of disease in the different armies are so different that no comparison of general rates of admission, noneffectiveness, etc., are worth making.

Chart L and Tables Nos. 77 and 78 show a comparison of rates for the United States and foreign armies.

Typhoid fever, however, offers an instance in which some fair comparison can be made. It will be observed that the United States admission rate per 1,000 of mean strength is lower than that of any other army and only approached by that of the Dutch army. However, the figures for the Dutch army available were those for the year 1910, no later data being at hand. The British for 1912 had a rate of over twice as great for their army in the United Kingdom.

SURGICAL OPERATIONS.

On page 205 will be found Table No. 66, which shows the principal surgical operations performed by medical officers upon officers and enlisted men. Operations upon families of officers and enlisted men and other civilians who are entitled to treatment at Army posts are not included. In 4,723 operations performed, 30 were failures and 21 deaths occurred. Ether was the anesthetic used in 1,937 cases, chloroform in 171, local anesthesia in 1,997, none in 546, and chloroform and ether or gas in 72. Three hundred and ninety-six appendicostomies were performed, and 258 herniotomies. There were two deaths following operations for appendicitis. Seven operations for goiter were performed.

Chart L.

Rates for total losses, discharges and deaths. The Army at home compared with those of foreign countries

Countries	years	Rates.
United States, {Continental} Enlisted men.	1913	18.40
		13.45
		4.95
British, {United Kingdom}	1912	11.71
		9.37
		2.34
French. {France}	1910	43.68
		40.67
		3.01
Prussian	1911	44.3
		42.3
		2.0
Bavarian.	1911	51.4
		49.5
		1.9
Spanish.	1910	38.17
		33.5
		4.67
Russian.	1910	37.13
		33.0
		4.13
Japanese	1909	30.51
		26.94
		3.57

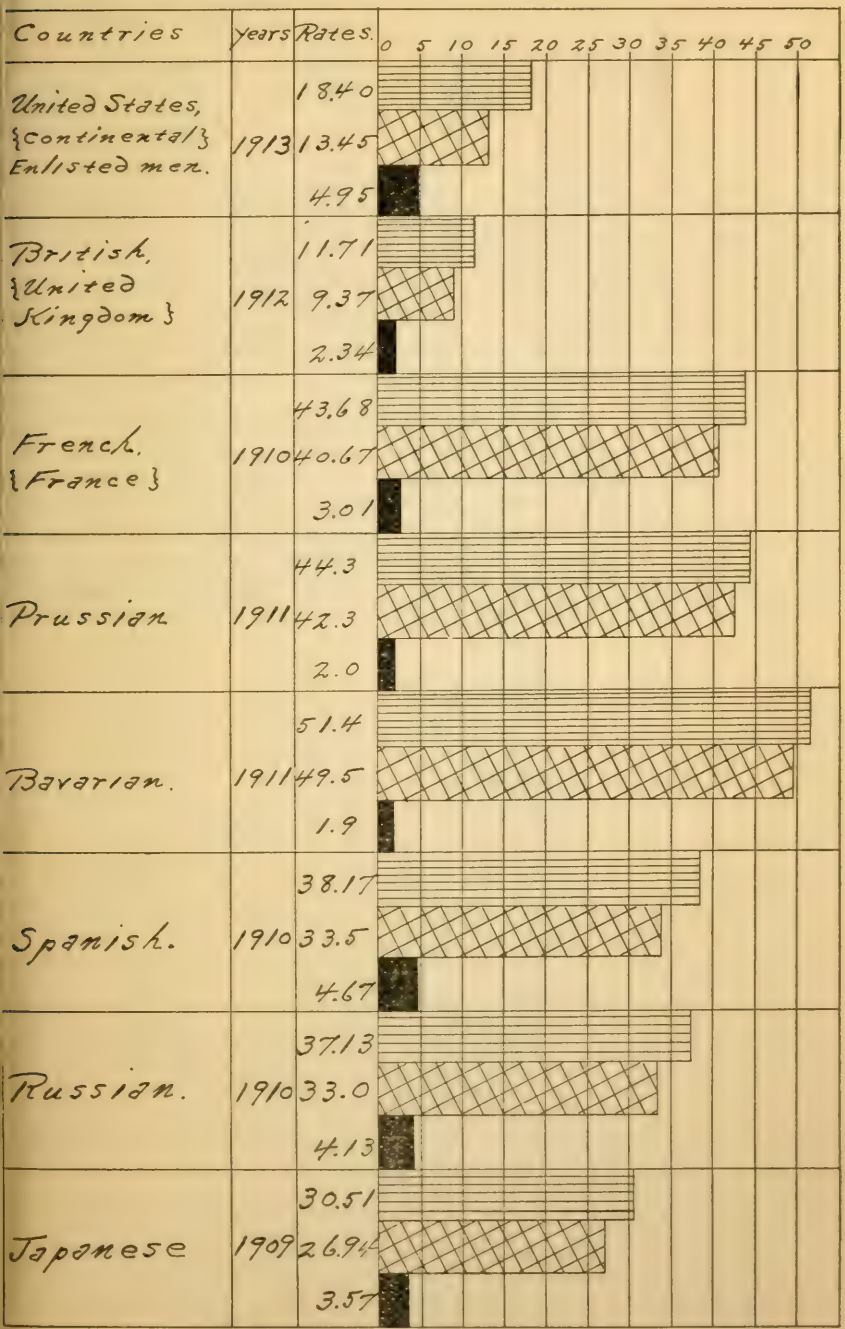


TABLE No. 5.—*Influence of disease on enlisted American troops of the Army, by arms of service, for the year 1913.*

	Mean strength.	Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.	Ratio per 1,000 of mean strength.			
						Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.
Infantry	29,000	19,458	415	139	754.33	670.96	14.29	4.79	26.01
Cavalry	13,423	9,977	143	61	370.49	743.28	10.53	4.49	27.60
Field Artillery	4,869	3,919	60	19	123.14	804.89	12.18	3.86	25.29
Coast Artillery	16,478	9,788	228	92	344.73	594.00	13.68	5.52	20.92
Ordnance	713	434	10	2	14.76	608.70	13.87	2.77	20.70
Engineers	1,605	957	25	7	41.02	596.26	15.40	4.31	25.56
Signal Corps	1,175	582	12	5	21.13	495.32	10.10	4.21	17.98
Hospital Corps	3,355	1,794	52	20	68.67	534.72	15.32	5.89	20.47
All others	10,148	7,348	137	52	226.52	724.08	13.35	5.07	22.32
Total	80,766	54,257	1,082	397	1,964.79	671.78	13.24	4.86	24.33

As Form No. 222 (A. G. O.) was discontinued with the report made thereon during the year, no statement can be made to indicate the occurrence of disease at different ages. Heretofore the highest noneffective, admission, and discharge rates were for men with less than one year's service. The same rates were also highest for those 19 years or under. For arms of the service the Field Artillery had the highest admission rate, the Signal Corps the lowest. The Signal Corps had the lowest noneffective rate and the Cavalry the highest.

Note:- Above figures do not include General Hospitals, Recruit Depots, Independent Stations, and Mexican Border Divisions.

Military Department, United States, comprising the States of Alaska { showing the relative Admission, Discharge and Death rates for Disease, { omitted men { year 1913.

UNITED STATES (CONTINENTAL) EXCLUSIVE OF ALASKA.

CONSTANTLY NONEFFECTIVE RATE.

The average mean strength of the troops serving in the United States was 59,608 (S. G. O.), of which 57,912 were white and 1,696 colored. The noneffective rate, the true measure of the effect of sickness on the military efficiency for this year shows an improvement over last year. There were fewer constantly sick by 217 in 1913 than in 1912, though the average strength was 1,234 greater.

Year.	Noneffective rate.	Case admission rate.			Highest noneffective rate for disease.	
		All causes.	For disease.	External causes.	Venereal.	Tuberculosis.
1913	22.94	619.90	487.94	131.96	3.58	2.34
1912	27.15	738.70	596.94	141.76	5.96	1.65
1911	31.40	837.00	680.00	157.00	8.82	1.63
1910	33.95	840.00	662.00	178.00	.....	.....
1909	39.70	945.00	.....	.....	.....	.....
1908	41.19	1,079.00	.....	.....	.....	.....

ADMISSION RATE.

The report for 1913 stated that in the tabulations for that year, cases only were counted. Readmission for the same illness are omitted in counting cases. Table 81 shows case admission and total admission for the Army, United States and American troops Philippine Islands, 1904 to 1911, inclusive.

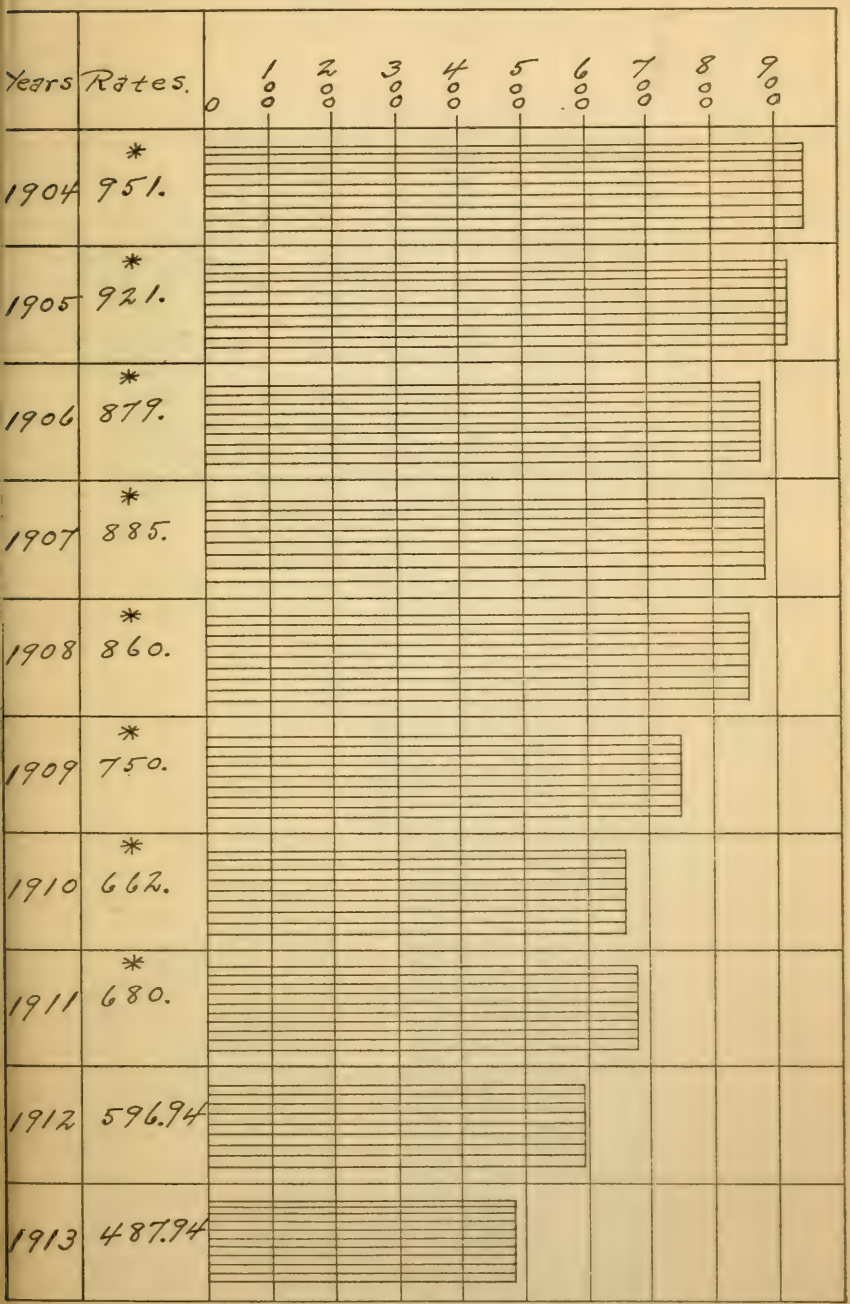
The admission rate for 1913 was 619.90, and is a marked improvement over the preceding year; this rate is compared with the rate for five years preceding in the total above.

DISCHARGES FOR DISABILITY.

The disability discharge rate for the United States for 1913 was 13.45 per 1,000, as compared with 14.48 for 1912, 15 for 1911, 15.28 for 1910, and 18.87 for 1909. These figures show a material reduction. The cause for this improvement during the last few years is believed to have been due to a large extent to General Orders 174, War Department, 1909, which requires that soldiers certified by medical officers to be permanently incapacitated for the military service shall be examined and observed by a board of three medical officers at a recruit depot or a general hospital before discharge. This procedure was changed by the War Department and, since the beginning of the year, the discharges are made by the department commander on the recommendations of a board of at least two medical officers.

Chart M.

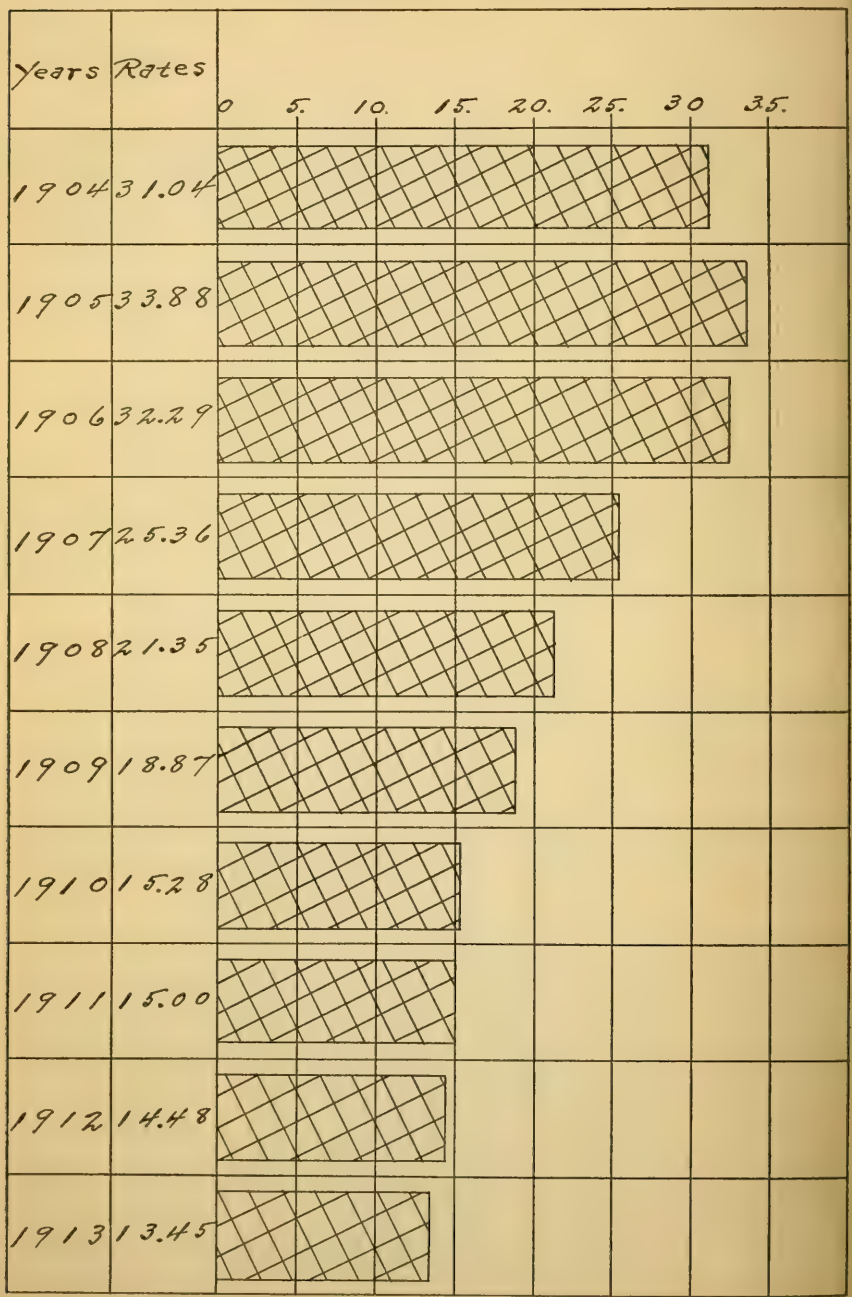
Admission Rates for Disease for the United States for American Troops {enlisted men} years, 1904-1913.



* Excess of Cases deducted to correspond with years preceding 1904, and 1912-1913.

Chart N.

Discharge Rates, All Causes, for the United States, American Troops {enlisted men} years, 1904-1913.



The following table shows the result of the work of the boards at the recruiting depots:

TABLE No. 6.—*Results at recruit depots of examination by boards, of soldiers recommended for discharge, year 1913.*

	Recruit depots.					
	Columbus Barracks, Ohio.	Jefferson Barracks, Mo.	Fort Logan, Colo.	Fort McDowell, Cal.	Fort Slocum, N. Y.	Total.
Number received	22	45	45	11	90	213
Number discharged for disability	19	38	40	11	77	185
Incurred "In line of duty"	7	19	16	3	28	73
Incurred "Not in line of duty"	12	19	24	8	49	112
Number in which line of duty was changed from "Yes" to "No"	4	1	2	.....	1	8
Number in which line of duty was changed from "No" to "Yes"	.....	.....	1	.....	2	3
Number returned to duty	2	7	5	.....	9	23
Number otherwise disposed of	1	1	.....	.....	1	3
Number remaining at end of year	.....	3	.....	.....	3	6

The principal causes of discharge with the percentage of the total number of discharges were mental alienation, 18.80; tuberculosis (all), 18.11; venereal diseases, 8.50; flat foot, 7.52; and organic diseases of the heart, 4.04. The order of frequency was the same for these diseases as in the year 1912.

TABLE No. 7.—*Discharges for disability, year 1913, United States, continental (excluding Alaska).*

Causes of discharge.	Number discharged	Per centage of total discharges for diseases or external causes.	Discharges for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty.
DISEASES.							
Diseases of the nervous system and organs of special sense	263	36.63	57	195	11	7	39
Mental alienation	135	18.80	29	100	6	1	16
Dementia precox	54	7.52	13	41	.....	.....	6
Defective mental development	40	5.57	.....	40	.....	.....	5
Psychosis, manic depressive	15	2.09	8	7	.....	1	1
Dementia, type unknown	14	1.95	6	8	.....	.....	3
General paralysis of the insane	9	1.25	1	2	6	.....	1
Psychasthenia	2	.28	.....	2	.....	.....	.....
Psychosis, traumatic	1	.14	1	.....	.....	.....	.....
Epilepsy	44	6.13	2	41	1	.....	10
Other diseases of the nervous system	22	3.06	5	15	2	1	5
Migraine	1	.14	.....	1	.....	.....	.....
Neurasthenia	13	1.81	5	7	1	1	2
Others	8	1.11	.....	7	1	.....	3
Diseases of the eyes	20	2.79	6	14	.....	.....	4
Trachoma	7	.97	.....	7	.....	.....	4
Retinitis	5	.70	3	2	.....	.....	.....
Keratitis	3	.42	2	1	.....	.....	.....
Astigmatism	2	.28	.....	2	.....	.....	.....
Hypermetropia	2	.28	.....	2	.....	.....	.....
Optic atrophy	1	.14	1	.....	.....	.....	.....
Neuralgia and neuritis	18	2.51	5	13	.....	.....	1
Neuralgia, chronic	2	.28	2	.....	.....	.....	.....
Hysteria	16	2.23	3	13	.....	.....	1
Otitis media	8	1.11	1	7	.....	.....	1

TABLE NO. 7.—*Discharges for disability, year 1913, United States, continental (excluding Alaska)*—Continued.

Causes of discharge.	Number discharged	Per centage of total discharges for diseases or external causes.	Discharges for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty.
DISEASES—continued.							
Diseases of the nervous system and organs of special sense—Continued.							
Other diseases of the spinal cord	7	0.97	6	1	.....	2	.....
Sclerosis, cerebrospinal, multiple	1	.14	.....	1	.....	.....	.....
Myelitis, chronic	5	.70	5	.....	.....	2	.....
Progressive muscular atrophy	1	.14	1	.....	.....	.....	.....
Epidemic cerebrospinal meningitis	3	.42	3	.....	.....	3	.....
Simple meningitis	2	.28	.....	2	.....	.....	1
Locomotor ataxia	2	.28	.....	.....	2	.....	.....
Chorea	2	.28	.....	2	.....	.....	1
General diseases	252	35.10	143	46	63	3	14
Tuberculosis	130	18.11	111	19	.....	2	7
Of the lungs	116	16.16	103	13	.....	2	6
Of other organs	14	1.95	8	6	.....	.....	1
Venereal diseases	61	8.50	2	13	46	.....	3
Syphilis	21	2.92	1	5	15	.....	1
Hereditary	1	.14	.....	1	.....	.....	.....
Secondary	9	1.25	1	2	6	.....	.....
Tertiary	11	1.53	.....	2	9	.....	1
Gonorrhea and results	40	5.57	1	8	31	.....	2
Chronic urethritis	17	2.37	.....	4	13	.....	2
Chronic arthritis	14	1.95	.....	1	13	.....	.....
Diseases of the eye	7	.97	1	1	5	.....	.....
Urethral stricture	2	.28	.....	2	.....	.....	.....
Articular rheumatism	15	2.09	13	2	.....	.....	1
Chronic	10	1.39	8	2	.....	.....	1
Acute and subacute	4	.56	4	.....	.....	.....	.....
Arthritis deformans	1	.14	1	.....	.....	.....	.....
Chronic alcoholism	12	1.67	.....	1	11	.....	1
Drug habit (cocaine, 5; morphine, 2)	7	.97	.....	2	5	.....	.....
Diabetes mellitus	6	.84	5	1	.....	.....	.....
Cancer	5	.70	5	.....	.....	.....	.....
Diabetes insipidus	3	.42	.....	3	.....	.....	1
Dysentery, entamebic	2	.28	2	.....	.....	.....	.....
Benign tumors	2	.28	2	.....	.....	.....	.....
Exophthalmic goiter	2	.28	.....	2	.....	.....	.....
Malarial cachexia	1	.14	.....	1	.....	.....	.....
Measles	1	.14	1	.....	.....	1	.....
Purulent infection	1	.14	.....	.....	1	.....	.....
Pellagra	1	.14	.....	1	.....	.....	.....
Leuchæmia	1	.14	1	.....	.....	.....	.....
Hodgkin's disease	1	.14	1	.....	.....	.....	.....
Hemophilia	1	.14	.....	1	.....	.....	1
Diseases of the bones and of the organs of locomotion	74	10.31	10	62	2	.....	2
Flat foot	54	7.52	1	53	.....	.....	.....
Diseases of the joints	8	1.11	6	2	.....	.....	.....
Arthritis	5	.70	4	1	.....	.....	.....
Ankylosis	2	.28	1	1	.....	.....	.....
Synovitis	1	.14	1	.....	.....	.....	.....
Others of the order (muscular atrophy 4, relaxed ligament 2, muscular contraction 1)	7	.97	.....	5	2	.....	2
Diseases of the bones	3	.42	3	.....	.....	.....	.....
Periostitis	2	.28	2	.....	.....	.....	.....
Necrosis	1	.14	1	.....	.....	.....	.....
Ganglion, chronic	1	.14	.....	1	.....	.....	.....
Hallux valgus	1	.14	.....	1	.....	.....	.....
Diseases of the circulatory system	39	5.43	26	13	.....	.....	5
Organic heart disease	29	4.04	18	11	.....	.....	5
Valvular disease	17	2.37	9	8	.....	.....	5
Chronic endocarditis	5	.70	5	.....	.....	.....	.....
Others (neurasthenia 4, neurosis 1)	5	.70	2	3	.....	.....	.....
Chronic myocarditis	2	.28	2	.....	.....	.....	.....
Diseases of the arteries	4	.56	4	.....	.....	.....	.....
Aneurism	3	.42	3	.....	.....	.....	.....
Obliterating endarteritis	1	.14	1	.....	.....	.....	.....
Chronic phlebitis	2	.28	2	.....	.....	.....	.....
Chronic pericarditis	1	.14	1	.....	.....	.....	.....
Thrombosis	1	.14	1	.....	.....	.....	.....
Varicose veins	1	.14	.....	1	.....	.....	.....
Cardiac palpitation	1	.14	.....	1	.....	.....	.....

TABLE No. 7.—*Discharges for disability, year 1913, United States, continental (excluding Alaska)*—Continued.

Causes of discharge.	Number discharged	Per centage of total discharges for diseases or external causes.	Discharges for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty.
DISEASES—continued.							
Diseases of the genito-urinary system	32	4.46	16	16	.....	.....	8
Nephritis	16	2.23	14	2	.....	.....	2
Chronic interstitial	8	1.11	8	.....	.....	.....	.....
Chronic parenchymatous	8	1.11	6	2	.....	.....	2
Enuresis	14	1.95	.....	14	.....	.....	6
Chronic pyelitis	1	.14	1	.....	.....	.....	.....
Chronic pyonephrosis	1	.14	1	.....	.....	.....	.....
Diseases of the digestive system	25	3.48	12	13	.....	1	4
Hernia	10	1.39	3	7	.....	.....	2
Inguinal	9	1.25	3	6	.....	.....	1
Abdominal	1	.14	.....	1	.....	.....	1
Diarrhea and enteritis	2	.28	1	1	.....	.....	1
Chronic colitis	1	.14	1	.....	.....	.....	.....
Chronic duodenal ulcer	1	.14	.....	1	.....	.....	1
Appendicitis	2	.28	2	.....	.....	1	.....
Carious and missing teeth	1	.14	.....	1	.....	.....	.....
Aphonia	1	.14	1	.....	.....	.....	.....
Chronic gastric ulcer	1	.14	.....	1	.....	.....	.....
Chronic gastritis	1	.14	1	.....	.....	.....	.....
Fistula in ano	1	.14	.....	1	.....	.....	1
Chronic constipation	1	.14	1	.....	.....	.....	.....
Chronic sprue	1	.14	1	.....	.....	.....	.....
Intestinal adhesions	1	.14	.....	1	.....	.....	.....
Biliary calculi	1	.14	1	.....	.....	.....	.....
Abscess of liver	1	.14	1	.....	.....	.....	.....
Cholecystitis	1	.14	.....	1	.....	.....	.....
Diseases of the respiratory system	20	2.79	17	3	.....	2	4
Pleurisy	6	.84	5	1	.....	2	1
Chronic fibrinous	3	.42	2	1	.....	.....	1
Serofibrinous	2	.28	2	.....	.....	1	.....
Empyema	1	.14	1	.....	.....	1	.....
Chronic bronchitis	5	.70	5	.....	.....	.....	.....
Pneumonia (lobar)	3	.42	3	.....	.....	.....	3
Asthma	3	.42	3	.....	.....	.....	.....
Goiter	2	.28	.....	2	.....	.....	.....
Tumor of lung	1	.14	1	.....	.....	.....	.....
Diseases of the skin and cellular tissue	8	1.11	4	4	.....	.....	.....
Corns	3	.42	.....	3	.....	.....	.....
Chronic abscess	2	.28	2	.....	.....	.....	.....
Others (painful scar, 1; keratosis, 1)	2	.28	2	.....	.....	.....	.....
Eczema	1	.14	.....	1	.....	.....	.....
Undiagnosed	3	.42	1	2	.....	.....	2
General physical weakness	2	.28	.....	2	.....	.....	2
Polyuria	1	.14	1	.....	.....	.....	.....
Congenital malformation	1	.14	.....	1	.....	.....	.....
Premature senility	1	.14	1	.....	.....	.....	.....
Total for diseases	718	100.00	287	355	76	13	78
EXTERNAL CAUSES.							
Fractures	33	35.87	29	.....	4	2	.....
Gunshot wounds	19	20.65	14	.....	5	.....	.....
Results of injuries incurred prior to enlistment	7	7.61	.....	7	.....	.....	1
Sprains	6	6.52	5	.....	1	1	.....
Incised wounds	5	5.43	5	.....	.....	.....	.....
Dislocations	5	5.43	5	.....	.....	1	.....
Contusions	3	3.26	3	.....	.....	.....	.....
Lacerated wounds	3	3.26	3	.....	.....	.....	.....
Ruptured organs	3	3.26	2	.....	1	.....	.....
Frostbite	2	2.17	1	.....	1	1	.....
Concussions	2	2.17	1	.....	1	.....	.....
Burn	1	1.09	1	.....	.....	.....	.....
Corrosive burn	1	1.09	1	.....	.....	.....	.....
Punctured wound	1	1.09	1	.....	.....	.....	.....
Freezing	1	1.09	1	.....	.....	.....	.....
Total	92	100.00	72	7	13	5	1
Total for diseases	718	88.64	287	355	76	13	78
Total for external causes	92	11.36	72	7	13	5	1
Grand total	810	100.00	359	362	89	18	79

DEATHS.

The death rate for diseases for the United States was 2.62 per 1,000, as compared with 2.28 in 1912 and 2.83 in 1911. That for external causes was 2.33 in 1913, 2.28 in 1912, and 1.89 in 1911. The total for diseases and external causes was 4.95 in 1913, as compared with 4.55 in 1912 and 4.72 in 1911. The total number of deaths in 1913 was 298; of this number 158 were due to disease, and 140 to external causes. Deaths, as well as discharges, which occurred in the United States among those who have been invalided home from their commands in foreign service, have been charged to the country where such commands are stationed. Tuberculosis caused 24 deaths in 1913, 16 in 1912, and 29 in 1911; measles, 11 in 1913, 12 in 1912, and 25 in 1911; pneumonia (lobar), 19 in 1913, 12 in 1912, and 18 in 1911; and nephritis, 14 in 1913, 12 in 1912, and 6 in 1911. There were 33 suicidal deaths in 1913, 47 in 1912, and 36 in 1911; 15 homicidal in 1913, 16 in 1912, and 14 in 1911; and 18 accidental drownings in 1913, 24 in 1912, and 13 in 1911. Of the accidental deaths, crushing caused the largest number, 33 in all. There were 92 accidental deaths in 1913, 72 in 1912, and 55 in 1911.

TABLE NO. 8.—*Deaths among enlisted troops serving in the United States, continental (excluding Alaska), year 1913.*

Causes of death.	Number.	Ratio per 1,000 of—	
		Mean strength.	Deaths from disease or external causes.
DISEASES.			
Tuberculosis	24	0.40	151.90
Pulmonary	16	.27	101.27
Meningitis, tuberculous	3	.05	18.99
Miliary	2	.03	12.66
Of the peritoneum	1	.02	6.33
Tuberculous enteritis	1	.02	6.33
Diffuse	1	.02	6.33
Pneumonia (lobar)	19	.32	120.25
Organic heart disease	13	.22	82.28
Myocarditis, chronic	4	.07	25.32
Valvular disease	4	.07	25.32
Cardiac dilatation	3	.05	18.99
Fatty degeneration	2	.03	12.66
Measles	11	.18	69.62
Epidemic cerebrospinal meningitis	11	.18	69.62
Chronic nephritis	9	.15	56.96
Interstitial	7	.12	44.30
Parenchymatous	2	.03	12.66
Appendicitis	8	.13	50.64
Cancer	5	.08	31.65
Acute nephritis	5	.08	31.65
Septicemia	4	.07	25.32
Syphilis	4	.07	25.32
Secondary	1	.02	6.33
Tertiary	3	.05	18.99
Pleurisy	4	.07	25.32
Empyema	2	.03	12.66
Acute fibrinous	1	.02	6.33
Serofibrinous	1	.02	6.33
Diarrhea and enteritis	4	.07	25.32
Enteritis	1	.02	6.33
Gastroenteritis	1	.02	6.33
Ulcer of duodenum	1	.02	6.33
Ulcer of intestines	1	.02	6.33
Alcoholism	3	.05	18.99
Acute	2	.03	12.66
Delirium tremens	1	.02	6.33
Aneurism of the aorta	3	.05	18.99
Bronchopneumonia	3	.05	18.99
Pancreatitis	3	.05	18.99
Cause of death unknown	3	.05	18.99
Diabetes mellitus	2	.03	12.66
Simple meningitis	2	.03	12.66

TABLE NO. 8.—*Deaths among enlisted troops serving in the United States, continental (excluding Alaska), year 1913*—Continued.

Causes of death.	Number.	Ratio per 1,000 of—	
		Mean strength.	Deaths from disease or external causes.
Otitis media	2	0.03	12.66
Hernia, inguinal	2	.03	12.66
Intestinal obstruction	2	.03	12.66
Thrombosis	1	.02	6.33
Entamoebic dysentery	1	.02	6.33
Abscess of brain	1	.02	6.33
Cerebral hemorrhage	1	.02	6.33
Pericarditis	1	.02	6.33
Arterial sclerosis	1	.02	6.33
Ankylostomiasis	1	.02	6.33
Fatty degeneration of the liver	1	.02	6.33
Abscess of the liver	1	.02	6.33
Cholecystitis	1	.02	6.33
Peritonitis, general	1	.02	6.33
Mastoiditis	1	.02	6.33
Total for disease	158	2.62	100.00
EXTERNAL CAUSES.			
Suicidal	33	.55	235.71
By firearms (revolver, 19; rifle, 5)	24	.40	171.43
By poisoning (phenol, 3; bichloride of mercury, 2; carbolic acid, 1)	6	.10	42.86
By hanging	1	.02	7.14
By jumping from high place	1	.02	7.14
By crushing (under street car)	1	.02	7.14
Homicidal	15	.25	107.14
By firearms: By comrades, 4 (quarrel, 1, unprovoked 3); by civilians, 3 (quarrel 2, unprovoked 1); by policeman, 1 (while escaping from arrest); unknown, 1 (by revolvers, 6; by rifle, 1; by shotgun, 1; unknown, 1)	9	.15	64.29
By cutting instruments, all cut with knives during quarrels: With comrade, 1; with civilian, 1; unprovoked assault by civilian, 1	3	.05	21.43
By strangulation (circumstances unknown)	1	.02	7.14
By fracture of skull (blow of fist by United States Marine during quarrel)	1	.02	7.14
By person unknown and manner unknown	1	.02	7.14
Accidental	92	1.53	657.14
By crushing	33	.55	235.71
In railroad wreck	17	.28	121.43
Struck by moving trains	8	.13	57.14
Struck by vehicles (automobiles, 4; caisson, 1; escort wagon, 1; gravel wagon, 1)	7	.12	50.00
By fall from high place	1	.02	7.14
By drowning	18	.30	128.57
Found drowned, circumstances unknown	8	.13	57.14
While bathing	5	.08	35.71
By falling into deep water	2	.03	14.29
By upsetting of rowboats	2	.03	14.29
By fall with wrecked aeroplane	1	.02	7.14
By fall	14	.23	100.00
From high places	9	.15	64.29
From horses	3	.05	21.43
From automobile	1	.02	7.14
Into a mortar pit at night	1	.02	7.14
By gunshot wounds	10	.17	71.43
By premature explosion of service charge in rapid-fire gun, while at target practice	3	.05	21.43
Shot by sentry	2	.03	14.29
Accidentally by comrades	2	.03	14.29
Circumstances unknown	2	.03	14.29
By an accidentally dropped revolver	1	.02	7.14
By acute poisoning (methyl alcohol, 5; unknown, 1)	6	.10	42.86
Injured by animals (kicked by horses)	2	.03	14.29
By lightning stroke	3	.05	21.43
Absorption of deleterious gases (illuminating gas)	1	.02	7.14
Punctured wound accidentally by a civilian	1	.02	7.14
Effects of excessive cold—freezing	1	.02	7.14
Effects of heat—sunstroke	1	.02	7.14
Electricity—accidental electrocution	1	.02	7.14
Concussion of the brain—knocked to the ground while boxing	1	.02	7.14
Total for disease	158	2.62	530.20
Total for external causes	140	2.33	469.80
Grand total	298	4.95	1,000.00

PREVALENCE OF SPECIAL DISEASES.

TYPHOID FEVER.

Three cases of typhoid fever (officers and enlisted men) occurred during the year in the Army stationed within the geographical limits of the United States. Two of these cases were in recently enlisted recruits who were admitted to the hospital with the disease, one on the fourth and the other on the sixth day of service. The latter case had not received the first dose of the typhoid prophylactic when admitted to the hospital. In both cases the disease was obviously contracted prior to enlistment. In the third case the prophylaxis was employed for more than a year previous to the attack, but the soldier stated that he had received only one injection. One case occurred among the American troops in China. This patient had been inoculated in 1911. No other case occurred either among the American or native troops at home or abroad. All the patients recovered.

In the Army (officers and enlisted men) in the United States in 1912 there were 18 cases with 3 deaths; in 1911, 44 cases with 6 deaths; in 1910, 142 cases with 10 deaths; and in 1909, when the typhoid prophylaxis was first begun voluntarily, 173 cases with 16 deaths. In the entire Army, American and native troops, serving at home and abroad in 1912, there were 27 cases with 4 deaths; in 1911, 69 cases with 8 deaths; in 1910, 198 cases with 14 deaths; and in 1909, 282 cases with 22 deaths.

TABLE NO. 9.—*Typhoid fever at military stations, United States (continental), officers and enlisted men, 1913.*

	Cases.	Days treated.	Constantly sick.	Died.
Fort Snelling, Minn	1	51	0.14	
Fort McDowell, Cal	1	19	.05	
Fort Stevens, Oreg	1	38	.10	
Total	3	108	.30	

The list following shows for the entire Army, officers and enlisted men, American and native troops, the place and date of the occurrence of each case of typhoid and paratyphoid fever, whether the typhoid prophylactic had been given, the result of the attack, and such other information as is considered necessary under remarks.

TABLE No. 10.—*Typhoid fever, the Army (all), 1913.*

Place of occurrence.	Date when admitted to hospital.	Had typhoid prophylactic been administered?	Result of attack.	Remarks.
AMERICAN TROOPS, UNITED STATES.				
Fort Snelling, Minn	June 26	No	Recovered, Aug. 16, 1913.	Prophylaxis given June 29 and July 9, 1913.
Fort Stevens, Oreg	Nov. 24	Yes	Recovered, May 30, 1914.	Prophylaxis completed Aug. 16, 1912. Number of injections, 1 (soldier's statement).
Fort McDowell, Cal	Dec. 13	No	Recovered, Feb. 4, 1914.	Contracted prior to enlistment; only 4 days' service.
AMERICAN TROOPS, CHINA.				
Tientsin, China	Oct. 23	Yes	Recovered, Jan. 8, 1914.	Prophylaxis administered in September, 1911.
PARATYPHOID.				
AMERICAN TROOPS, UNITED STATES.				
Fort Douglas, Utah	May 25		Recovered, Sept. 15, 1913.	Contracted in desertion.
Fort Niagara, N. Y	Nov. 6		Recovered, Dec. 19, 1913.	Typhoid prophylaxis completed 1911.
Fort Porter, N. Y	Nov. 30		Recovered, Jan. 6, 1914.	
AMERICAN TROOPS, PANAMA, CANAL ZONE.				
Camp Otis	Feb. 21		Recovered, Mar. 28, 1913.	
PHILIPPINE ISLANDS.				
American troops, Augur Barracks.	June 2		Recovered, July 4, 1913.	
Philippine Scouts, Augur Barracks.	Sept. 12		Recovered, Sept. 30, 1913.	

The following is a tabulation of these cases:

TABLE No. 11.—*Typhoid and paratyphoid fever, the Army, officers and enlisted men, American and native troops, calendar year, 1913.*

	Cases.		Deaths.		Immunized persons.	
	Number.	Rates for 1,000 mean strength.	Number.	Rates for 1,000 mean strength.	Cases.	Deaths.
TYPHOID FEVER.						
United States	3	0.05			1	
China	1	.79			1	
Total Army	4	.044			2	
PARATYPHOID FEVER.						
United States	3	.05				
Philippine Islands:						
American troops	1	.08				
Native troops	1	.20				
Panama, Canal Zone	1	1.19				
Total paratyphoid	6	.066				

It is quite interesting to note that among all the troops scattered along the Mexican border and in the large camps in Texas that not a single case of typhoid fever has occurred in an inoculated man since June 4, 1912. One case of typhoid fever occurred there in July and one in October, 1912 but in neither case had the prophylactic been administered. The following tabulation is for the purpose of comparing the figures for 1913 with those for 1911 and 1912:

Typhoid fever, the Army, officers and enlisted men, American and native troops.

	Cases.		Deaths.		Immunized persons.	
	Number.	Rates for 1,000 mean strength.	Number.	Rates for 1,000 mean strength.	Cases.	Deaths.
1911	69	0.85	8	0.09	11	1
1912	27	.31	4	.044	8	.....
1913	4	.044	.....	.....	2	.....

It is of interest to note that during the year a number of cases of typhoid fever occurred among the civilian population which had not been inoculated at posts where no case occurred among the protected military personnel. At Fort Monroe, Va., there were 2 cases; at Fort Logan, Colo., 1 case; at Fort Benjamin Harrison, Ind., 1 case; at Fort Mills, P. I., 3 cases; at Ludlow Barracks, P. I., 1 case; and at Schofield Barracks, Hawaii, 1 case. The surgeon at Fort D. A. Russell, Wyo., reported that some 40 cases of typhoid fever occurred in the neighboring city of Cheyenne during the late summer and the early autumn. Likewise the surgeon at the Cavalry camp reported that during July and the first half of August, 1913, 48 cases of typhoid fever occurred in the town of Winchester, Va., 5 miles distant from the camp.

Special attention is invited to chart P, page 52, showing the admission and death rates for enlisted men only for the United States. This chart shows graphically the remarkable decrease in both rates as the result of the use of the typhoid prophylactic. This immunization was begun, but was voluntary, in 1909, and was made compulsory for the entire Army late in 1911. (See the annual report of this office for 1912, pp. 52 et seq., for the various steps from voluntary to compulsory prophylaxis.) It is to be especially emphasized that there has been no lessening of the efforts in the Army to prevent, by improved sanitary measures, the occurrence of typhoid infection. Advances in the other sanitary measures have gone on, hand in hand, with the extension of the typhoid prophylaxis. It is believed that the typhoid prophylaxis is as potent a preventive against typhoid as vaccination is against smallpox. Vaccination is certainly a reliable measure for the prevention of smallpox, and yet few would advocate the abolition of other needful sanitary measures.

Reimmunizations with the typhoid prophylactic are now carried out upon reenlistment in the same way as revaccination against smallpox. The duration of the immunity is not yet known, but it is improbable that it is as long as that conferred by vaccinia against smallpox, and therefore reimmunization at the beginning of each enlistment is believed to be appropriate and convenient from an administration point.

Chart O

Admission, Discharge, Death and Noneffective rates for Diseases having the highest rates for the United States {enlisted men} year, 1913.

Admissions

Diseases.	Rates	0	10	20	30	40	50	60	70	80
Venereal Diseases	85.83									
Tonsilitis {follicular}	37.29									
Bronchitis	28.79									
Diarrhea and Enteritis	26.98									
Influenza	15.15									

Discharges

Diseases.	Rates	0	.50	1.00	1.50	2.00	2.50
Mental Alienation	2.24						
Tuberculosis {all}	2.16						
Venereal Diseases.	1.01						
Flat Feet.	.90						
Epilepsy.	.73						

Deaths

Diseases.	Rates	0	.05	.10	.15	.20	.25	.30	.35	.40
Tuberculosis {all}	40									
Pneumonia {lobar}	.32									
Organic Heart Disease	.22									
Measles	.18									
Epidemic cerebro-spinal Meningitis.	.18									

Noneffective.

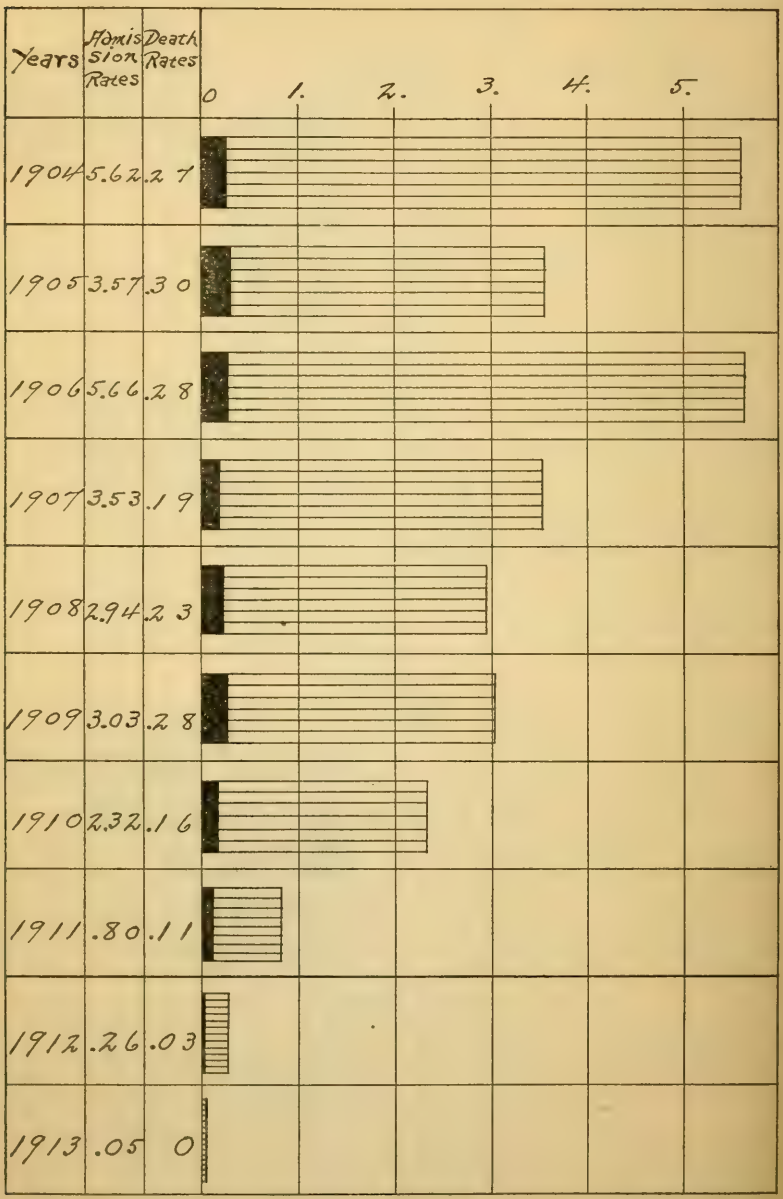
Diseases.	Rates	0	.50	1.	1.5	2.	2.5	3.	3.5
Venereal Diseases.	3.58								
Tuberculosis {all}	2.34								
Mental Alienation	.81								
Rheumatism, acute and chronic, articular.	.63								
Bronchitis	.57								

Chart P.

Typhoid Fever.

Admission and Death Rates.

Admission and Death rates for Typhoid Fever, United States, American Troops {enlisted men} years, 1904-1913.



Admissions. Deaths.

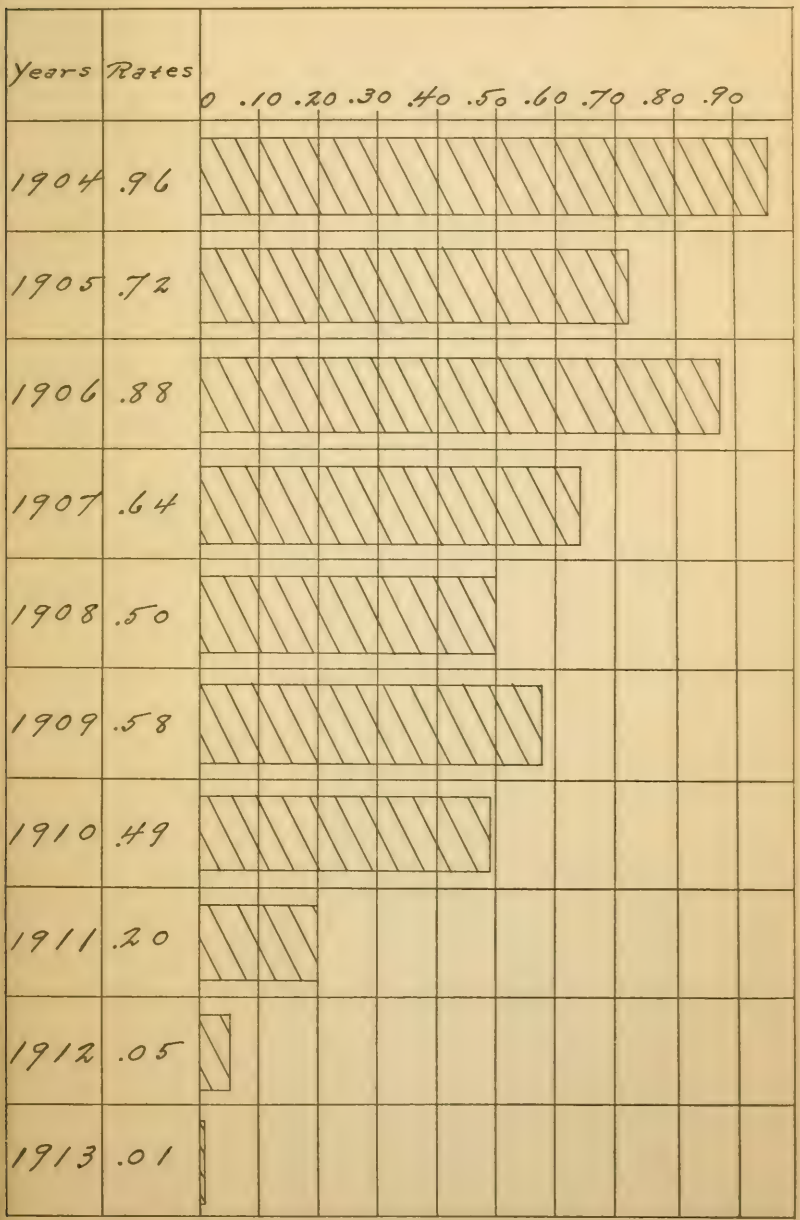
Anti-typhoid vaccination begun voluntarily in 1909 was made compulsory in the year 1911.

Chart P 1

Typhoid Fever.

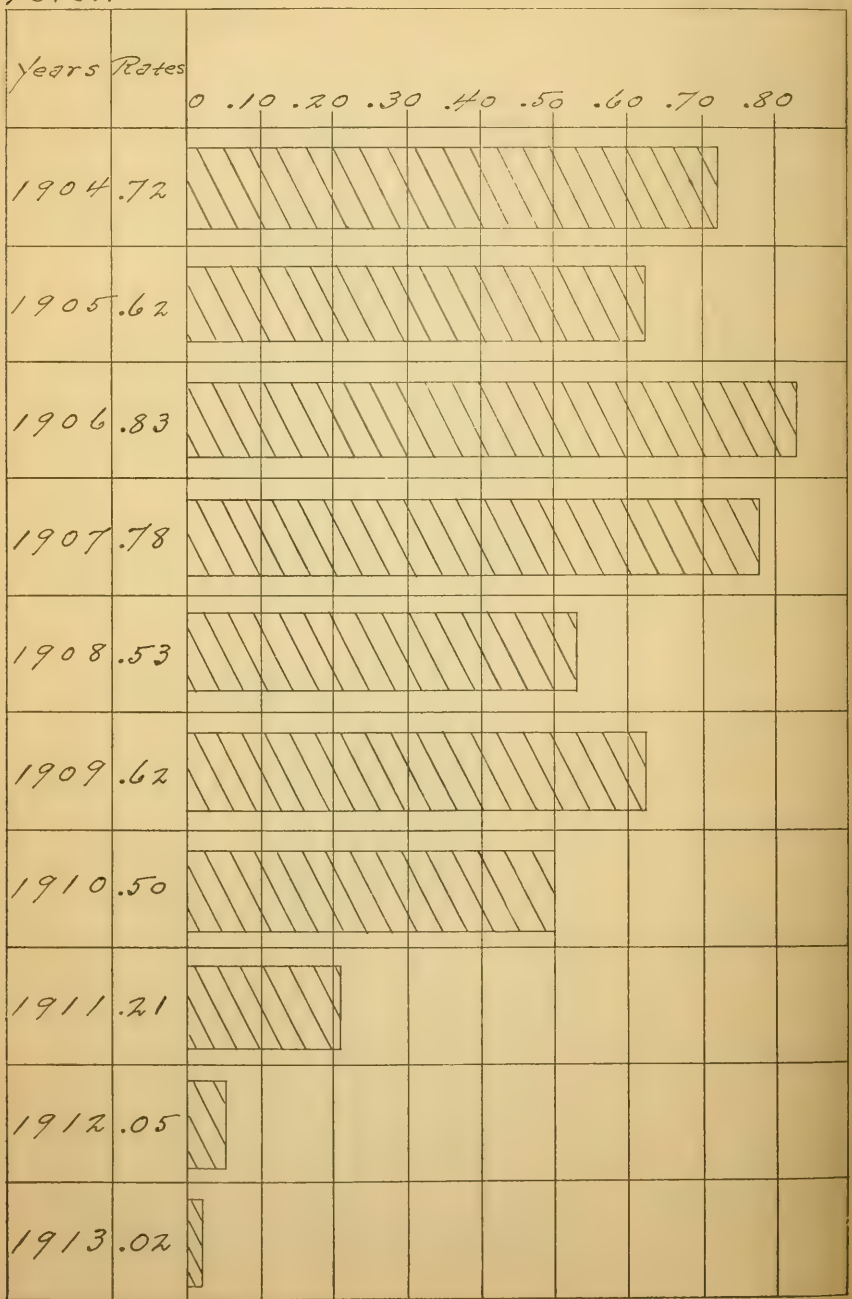
Noneffective Rates.

Noneffective rates for Typhoid Fever, United States, {enlisted men} years, 1904-1913.



Anti-typhoid vaccination made compulsory in the year 1911.

Chart Q
Typhoid Fever.
Noneffective Rates.
Noneffective rates for Typhoid Fever for the Army {Officers, American Troops, Porto Rican, and Philippine Scouts} 1904-1913. Includes Paratyphoid Fever.



It is again recommended that when it may become necessary to mobilize either the militia or volunteer troops in the field that this measure be made compulsory for them.

VENEREAL DISEASES.

The application of preventive measures to reduce the frequency of venereal diseases, begun four years ago, has been continued throughout the past year with success. There still remains room for a marked improvement. This class of disease at most posts still constitutes the greatest source of noneffectiveness. A better comprehension of the general scope of the subject of the prevention of venereal diseases is now possible. The discussion of this subject at the last International Congress of Medicine in London showed still great divergence of opinion, but, nevertheless, indicated hope for an improvement. It is, therefore, not unnatural that there should be considerable difference in views held by medical officers of the Army on this subject. The encouraging feature is the reduction in the incidence of these diseases in the Army, and the great and continued interest displayed by communities and even State organizations. The interest is world-wide and promises to remain so, but, as long as it is not merely a question of medicine, even more largely a great international social problem, the Army must expect to be limited in its improvement by the conditions of the society surrounding it.

While there has been a general improvement in the Army as a whole, the results at different posts in carrying out venereal prophylaxis have been very variable. As the method now is fairly well crystallized and, therefore, much the same in each command, the results seem to be in proportion to the earnestness and intelligence of the commanding officers and the surgeons entrusted with carrying out the orders on this subject. Directions are so explicit and cover so well the different phases of this subject that the individual personal equation of the surgeon is a less important factor in this matter than is that of the commanding officer. In other words, the orders covering the subject of the prevention of venereal diseases in the Army are no exception to any other orders in that compliance with them depends upon the character of the commanding officer charged with enforcing them.

A study was made by this office with a view to determining the influence of locality and distance of Army posts from cities in the bearing that it might have on the prevalence of venereal diseases in those commands. Venereal prophylaxis has to be taken within a certain length of time after exposure in order to be effective. At posts at such distances from cities that a considerable period of time would elapse before the soldier could return to take the venereal prophylaxis after exposure to infection, it was thought the incidence would be high for these diseases. On examination this was found to be by no means always the case. While it was true for some posts under such conditions, it was not for others, and one was forced to the conclusion that the posts where the incidence of the venereal diseases was low, had attained that desirable condition through an enforcement of the orders on this subject. The character of the command also influences the incidence of venereal diseases. Older and more settled soldiers, especially in the garrisons where many of them are

married, would be expected to affect the rate favorably and such seems to be the case.

In the Philippines the social conditions seemed to be a contributing factor in maintaining a higher rate for these diseases than in the United States; at any rate, it was apparently the only factor in the problem that differs from that of the United States. At the end of the second six months of 1913 the rates for venereal diseases were computed for the posts in the United States and those that showed a higher rate than for the first six months had their attention invited to this fact. It was hoped in this way that an improvement would result. It seemed reasonable that a post that had once attained a certain rate for diseases of that character should at least keep it to that and not develop a higher rate. In this, however, there was disappointment, for the rate at some posts continued to increase for the first six months of 1914. The only apparent reason for this was a failure in administration. This office is now able every month, through the data placed on the revised sanitary reports, to readily learn the prevalence of venereal diseases at any post. Many of the smaller posts report no new cases during the month, and even some of the larger posts show a remarkable improvement in the reduction of the diseases from month to month. In the face of a general improvement in the Army in this respect, several posts have continued to develop a higher rate rather than a lower one, and it is believed that the time has come when the commanding officers should be held accountable for excessive prevalence of venereal diseases in their commands. They certainly would be so held for excessive alcoholism or any other drug addiction, and it is believed that the "military instinct" should perceive as readily the value of maintaining a high state of physical efficiency through a low venereal rate as of keeping the "powder dry." While certain factors at some posts may exist that make it difficult or impossible to obtain as low a rate at one post as at some others, the failure to attain the lesser rate of the first six months of the year at the same post is a reflection on the manner in which the prophylaxis against venereal disease was carried out for the latter period. As venereal diseases are not "seasonal" nor epidemic in the ordinary sense, the conclusion is that the efforts to combat them were relaxed. This is the usual history of such a movement, and it was, therefore, believed desirable to call the attention of the proper officers to the increase of disease and consequent noneffectiveness and urge upon them a continuance of the efforts that have reduced the rate in the United States from 115.74 in 1912 to 85.83 in 1913. Nothing has been shown to disprove the confidence in the efficacy of prophylaxis.

In grouping the posts referred to above with reference to their situation in or near cities, the fact appeared that the rate was constantly 27 to 28 points higher at those posts that were in less ready communication with cities than at those posts that were either within the limits or had most convenient means of communication. The explanation of this condition would appear to be that at those posts the higher rate was caused by the failure of those exposing themselves to infection to return for treatment within the time during which prophylaxis is effective.

It was hoped that the sale at post exchanges for a nominal price of prophylactic packets would encourage the soldier to carry one with him that it might be used when he remained away from the post for

such a time that prophylaxis, when he returned, would no longer be effective. But, as the chief surgeon of the Eastern Department has noted in his annual report, soldiers do not seem to be willing to purchase these packets. Many exchanges report few, if any, sales, and apparently either the K-packet must be distributed without charge to the soldier or passes should be restricted to such time as would bring back those likely to be exposed to infection before the time had elapsed during which prophylaxis is effective.

It is, however, the opinion of this office that an exact application of the provisions of General Orders No. 17, War Department, 1912, with the muleting of pay of those liable under General Orders No. 31, War Department, 1912, would result in a further reduced rate in disease and an increase in the effectiveness of the Army due to improved health. As venereal diseases continued during 1913 to cause a noneffective rate equal to the combined rates of the four diseases next in order, it is important that the campaign against them be continued.

TABLE No. 12.—*Venereal diseases, Army and United States proper, enlisted men, compared for years 1911, 1912, and 1913.*

	Army (enlisted men).			United States proper (enlisted men).		
	1913	1912	1911	1913	1912	1911
Original admissions (cases) per 1,000 of mean strength.	97.22	136.70	163.49	85.83	115.74	145.29
Constantly noneffective rate	4.51	7.78	10.14	3.58	5.96	8.82

TABLE No. 13.—*Venereal diseases, admissions and discharges, Army American troops (enlisted men), year 1913.*

	Mean strength.	Syphilis.				Chancroid.			
		Admissions.		Discharges.		Admissions.		Discharges.	
		Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
United States	59,608	1,251	20.99	21	0.35	917	15.38	.....	.....
Alaska	1,141	11	9.64	.....	.....	2	1.75	.....	.....
Hawaii	6,130	155	25.29	4	.64	62	10.11	.....	.....
Philippines	11,188	371	33.16	6	.53	326	29.14	1	0.09
China	1,216	63	51.81	.....	.....	118	97.04	.....	.....
Panama Canal Zone	797	20	25.09	1	1.25	74	92.85	.....	.....
Army transports	686	4	5.83	.....	.....	11	16.03	.....	.....
Total	80,766	1,875	23.22	32	.39	1,510	18.70	1	.01

	Gonorrhea.				Total.			
	Admissions.		Discharges.		Admissions.		Discharges.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
United States	2,948	49.46	40	0.66	5,116	85.83	61	1.01
Alaska	16	14.02	.....	.....	29	25.42	.....	.....
Hawaii	345	56.28	1	.16	562	91.68	5	.80
Philippines	975	87.14	17	1.49	1,672	149.45	24	2.11
China	94	77.30	1	.82	275	226.15	1	.82
Panama Canal Zone	63	79.05	.....	.....	157	196.99	1	1.25
Army transports	26	37.90	.....	.....	41	59.77	.....	.....
Total	4,467	55.31	59	.72	7,852	97.22	92	1.13

TABLE No. 13.—*Venereal diseases, admissions, and discharges, Army American troops (enlisted men), year 1913*—Continued.

	Total days.	Constantly sick.	Ratio per 1,000.
Syphilis	39,597	108.49	1.34
Chancroid	21,670	59.37	.74
Gonorrhea	71,717	196.48	2.43
Total	132,984	364.34	4.51

TABLE No. 14.—*Venereal diseases, by years 1909 to 1913, United States, continental (excluding Alaska), enlisted men.*

[Ratio per 1,000 of mean strength.]

	Number of cases (after deducting recurrent admissions).	Admitted.			Discharged on certificate of disability.			Died.			Noneffective.		
		Total.	White.	Colored.	Total.	White.	Colored.	Total.	White.	Colored.	Total.	White.	Colored.
Gonorrhea and results:													
1913 [1]	49.46	49.46	49.14	60.14	0.66	0.68	....	....	....	....	1.84	1.84	1.65
1912 [1]	70.07	70.07	69.87	74.36	.60	.61	0.40	0.02	0.02	....	3.26	3.27	2.94
1911	85.37	94.52	94.48	95.12	.79	.84	....	....	....	....	4.68	4.72	3.93
1910	91.22	102.44	102.17	107.17	.77	.78	.67	....	....	....	5.90	5.98	4.41
1909	105.86	125.27	124.49	147.37	1.36	1.34	2.08	....	....	....	7.22	7.23	7.02
Chancroid:													
1913 [1]	15.38	15.38	15.11	24.76	....	....	....	....	....	....	.57	.56	.98
1912 [1]	20.09	20.09	20.52	10.45	.03	.03	....	....	....	....	1.01	1.03	.50
1911	23.55	25.04	25.22	21.82	....	....	....	....	....	....	1.32	1.34	1.05
1910	24.23	26.42	25.83	36.84	....	....	....	....	....	....	1.53	1.51	1.86
1909	23.49	25.33	25.09	32.13	....	....	....	....	....	....	1.54	1.52	2.03
Syphilis:													
1913 [1]	20.99	20.99	20.98	21.23	.35	.29	2.36	.07	.05	.59	1.17	1.15	1.90
1912 [1]	25.58	25.58	25.84	19.69	.62	.61	.80	.03	.03	....	1.70	1.68	2.11
1911	36.37	44.30	45.33	25.91	.52	.48	1.36	.11	.11	....	2.82	2.85	2.30
1910	22.54	26.65	26.68	26.12	1.13	1.15	.67	.04	.04	....	2.71	2.75	2.07
1909	22.01	26.85	26.47	37.74	1.92	1.81	5.19	....	....	....	2.68	2.64	3.74
Total venereal:													
1913 [1]	85.83	85.83	85.23	106.13	1.01	.97	2.36	.07	.05	.59	3.58	3.55	4.53
1912 [1]	115.74	115.74	116.24	104.50	1.26	1.26	1.21	.05	.05	....	5.96	5.98	5.55
1911	145.29	163.85	165.03	142.85	1.31	1.31	1.36	.11	.11	....	8.82	8.91	7.29
1910	137.98	155.51	154.69	170.13	1.90	1.94	1.34	.04	.04	....	10.14	10.25	8.34
1909	151.35	177.46	176.04	217.24	3.28	3.14	7.27	....	....	....	11.44	11.39	12.79

[1] Recurrent admissions were not tabulated years 1912 and 1913.

TABLE No. 15.—*Syphilis, United States (continental), excluding Alaska, years 1909–1913, enlisted men.*

[Ratio per 1,000 of mean strength.]

Year.	Primary syphilis.			Secondary syphilis.			Tertiary syphilis.			Hereditary syphilis.			Total.		
	Case rates.	Admission rates.	Noneffective rates.	Case rates.	Admission rates.	Noneffective rates.	Case rates.	Admission rates.	Noneffective rates.	Case rates.	Admission rates.	Noneffective rates.	Case rates.	Admission rates.	Noneffective rates.
1913 [1]	2.72	2.72	0.13	15.45	15.45	0.73	1.90	1.90	0.27	0.02	0.02	0.01	20.99	20.99	1.17
1912 [1]	3.89	3.89	.18	19.01	19.01	1.20	2.50	2.50	.31	.17	.17	.01	25.58	25.58	1.70
1911	3.75	4.09	.26	28.66	35.54	2.14	3.64	4.29	.43	.33	.38	.02	36.37	44.30	2.85
1910	3.34	3.24	.23	17.28	19.96	2.00	1.83	2.01	.36	.11	.12	.01	22.54	25.33	2.60
1909	3.15	3.20	.24	17.09	21.67	2.17	1.75	1.96	.27	.02	.02	.00	22.01	26.85	2.68

[1] Recurrent admissions were not tabulated years 1912 and 1913.

It will be seen from these tables that the rate for venereal diseases (cases) for the United States, continental, was 85.83 per 1,000 for 1913, as compared with 115.74 per 1,000 for 1912. There were 242 cases of syphilis less than last year. For gonorrhea, the number of cases is 1,142 less than last year, and in the local infection, chancroid, the diminution is 256. More syphilis is now diagnosed than formerly through the Wassermann reaction, which may, in part, account for the marked decrease in the number of cases of chancroid. In 1912 there was a large falling off in the number of secondary and tertiary cases of syphilis with a slight increase in the case rate for the primary cases. In comparing the figures for 1912 and 1913, and especially 1913, with the preceding years, it must be borne in mind that the diagnosis prior to 1911 was made without the advantage of the Wassermann reaction. These figures, therefore, include latent cases which are now detected by it and which were largely missed prior to 1911. Additional value is given to the venereal rates for 1913 by the fact that now under the operations of General Orders 17 bimonthly physical examinations of troops are held throughout the Army and concealed cases, which were in former years probably quite numerous are now reduced to a minimum. The fact that the total venereal rates in spite of these factors tending to swell them show a decided reduction over previous years must be regarded as an important achievement of preventive medicine.

The noneffective rate for the United States for 1913 is 3.58, as compared with 5.96 for 1912, 8.82 in 1911, and 10.14 for 1910. This rate is the true measure of noneffectiveness produced and shows in a still more definite and satisfactory way the improvement effected. While not as marked a reduction from 1912 as was obtained in 1912 over 1911, it will become more difficult each year to secure such great reductions.

By reference to Table No. 12 it will be seen that the rate for the total Army also showed a greater improvement than was made last year. The admission rate in 1913 was 97.22, and in 1912, 136.70, while the noneffective rate was 4.51 in 1913 and 7.78 per 1,000 in 1912. As noted elsewhere, the rates in the Philippine Islands did not show as much improvement as the corresponding ones in the United States. The admission rate in the Philippine Islands in 1913 was 149.45 per 1,000, and in 1912, 249.17, while the noneffective rate was 8.92 in 1913 and 16.55 in 1912.

There were no colored troops in the Philippine Islands in 1910 and 1911; therefore the rates for these years are for white troops. The rate for white troops in 1913 was 140.77 per 1,000 for admissions and 8.06 for noneffectiveness, while that for the colored troops was 194.37 per 1,000 for admission with a noneffective rate of 12.36. It is thus apparent that the rates for both white and colored troops showed a very satisfactory improvement, but that the rates for the colored troops are still exceedingly high.

TABLE No. 16.—*Recruit depots—Total number of admissions, venereal diseases, with ratios and mean strength, officers and enlisted men, years 1911, 1912, and 1913.*

Recruit depots.	Year 1911.			Year 1912.			Year 1913.		
	Admissions.		Mean strength.	Admissions.		Mean strength.	Admissions.		Mean strength.
	Total.	Ratio.		Total.	Ratio.		Total.	Ratio.	
Fort Slocum, N. Y	425	338.92	1,254	196	151.12	1,297	114	104.78	1,088
Jefferson Barracks, Mo	324	263.63	1,229	165	134.80	1,224	170	153.15	1,110
Columbus Barracks, Ohio	312	240.93	1,295	167	139.75	1,195	188	158.51	1,186
Fort McDowell, Cal	207	253.06	818	78	115.21	677	58	74.45	779
Fort Logan, Colo	162	274.58	590	149	230.65	646	77	131.85	584

Table No. 16 shows the rates of admission for three years of venereal disease at the five recruiting depots. A most satisfactory decrease in the rate for 1913 is observed at Fort Logan, Colo., where a reduction of over 70 per cent was effected. This is particularly gratifying because last year Fort Logan had the highest rate of any recruit depot.

The rates for Jefferson Barracks, Mo., and Columbus Barracks, Ohio, are slightly higher than for the preceding year. This increase may be accounted for by the fact that many cases, after having been accepted by the recruiting officer and sent to the depot, present symptoms of venereal disease on arrival. This fact alone will always keep the rate up at recruit depots, as compared with posts.

In two years a reduction of over 300 per cent in the rate has been made at Fort Slocum, N. Y.

TABLE No. 17.—*Venereal diseases, officers and enlisted men, admissions and ratios per 1,000, for posts of more than 300 men, in the United States (excluding Alaska), year 1913.*

		Relative standing on list previous year.	Admissions.		Mean strength.
			Total.	Ratio.	
1	Fort Oglethorpe, Ga	4	165	234.04	705
2	Fort Ethan Allen, Vt	26	118	181.54	650
3	Fort Snelling, Minn	6	64	150.94	424
4	Fort Thomas, Ky		71	140.32	506
5	Fort George Wright, Wash	13	73	135.44	539
6	Fort Sam Houston, Tex	3	161	129.21	1,246
7	Fort Douglas, Utah	15	100	125.63	796
8	Fort Logan H. Roots, Ark		40	125.00	320
9	Fort McKinley, Me	30	86	119.94	717
10	Fort McPherson, Ga	1	87	115.69	752
11	Fort Monroe, Va	27	126	113.41	1,111
12	Fort McIntosh, Tex		42	110.24	381
13	Fort Moultrie, S. C	8	49	105.38	465
14	Fort Huachuca, Ariz	37	56	102.38	547
15	Fort Strong, Mass	14	38	99.48	382
16	Fort Du Pont, Del	12	49	95.33	514
17	Fort Totten, N. Y	42	73	94.93	769
18	Fort Barrancas, Fla	24	50	92.08	543
19	Fort Washington, Md	2	36	91.60	393
20	Presidio of San Francisco, Cal	9	165	88.66	1,861
21	Fort Bliss, Tex	22	63	88.48	712
22	Fort Williams, Me	21	50	86.66	577
23	Fort Screven, Ga	17	41	85.77	478
24	Washington Barracks, D. C	47	57	84.70	673
	United States (officers and enlisted men)		5,128	81.75	62,729
25	Fort Myer, Va	44	45	77.32	582
26	Fort D. A. Russell, Wyo	29	37	74.15	499
27	Fort Leavenworth, Kans	25	70	69.38	1,009
28	Fort Andrews, Mass	11	28	69.14	405

TABLE No. 17.—*Venereal diseases, officers and enlisted men, admissions and ratios per 1,000, for posts of more than 300 men in the United States (excluding Alaska), year 1913*—Continued.

		Relative standing on list previous year.	Admissions.		Mean strength.
			Total.	Ratio.	
29	Fort Hancock, N. J.	52	50	69.06	724
30	Vancouver Barracks, Wash.	31	87	67.23	1,294
31	Plattsburg Barracks, N. Y.	38	52	66.50	782
32	Fort Greble, R. I.	57	20	66.45	301
33	Fort Howard, Md.	10	28	62.50	448
34	Fort Terry, N. Y.	40	38	62.19	611
35	Fort Sheridan, Ill.	28	27	61.65	438
36	Fort Riley, Kans.	39	81	61.51	1,317
37	Fort Hamilton, N. Y.	54	32	58.39	548
38	Fort Sill, Okla.	16	56	57.79	969
39	Fort H. G. Wright, N. Y.	41	36	53.18	677
40	Madison Barracks, N. Y.	7	34	52.23	651
41	Presidio of Monterey, Cal.	23	55	48.67	1,130
42	Fort Clark, Tex.	20	16	48.34	331
43	Fort Jay, N. Y.	32	19	42.32	449
44	Fort Lawton, Wash.	56	16	40.51	395
45	Fort Winfield Scott, Cal.	43	37	39.70	932
46	Fort Robinson, Nebr.	59	25	38.76	645
47	Fort Adams, R. I.	55	13	23.72	548
48	Fort Caswell, N. C.	51	7	22.01	318
49	Fort Meade, S. Dak.	18	6	17.54	342
50	Fort Barry, Cal.	60	5	12.47	401
51	Fort Yellowstone, Wyo.	62	2	4.88	410

TABLE No. 18.—*Venereal diseases—Army, officers and enlisted men, by departments and divisions, year 1913.*

	Mean strength.			Cases.			Rates per 1,000 of mean strength.		
	Officers.	Enlisted men.	Total.	Officers.	Enlisted men.	Total.	Officers.	Enlisted men.	Total.
Army—American troops	4,296	80,766	85,062	20	7,852	7,872	4.66	97.22	92.54
United States (continental), excluding Alaska	3,121	59,608	62,729	12	5,116	5,128	3.84	85.83	81.75
Eastern Department	1,066	20,458	21,524	....	1,877	1,877	.....	91.75	87.20
Central Department	325	5,698	6,023	3	416	419	9.23	73.01	69.56
Second Tactical Division	484	9,133	9,617	5	872	877	10.33	95.48	91.19
Southern Department (excluding Cavalry division)	256	4,773	5,029	1	435	436	3.91	91.14	86.70
Cavalry Division, Mexican border	120	2,379	2,499	....	127	127	.....	53.38	50.82
Western Department	539	10,548	11,087	3	667	670	5.57	63.23	60.42
Independent stations	183	1,533	1,716	....	77	77	.....	50.28	44.87
Recruit depots	111	4,636	4,747	....	607	607	.....	130.93	127.87
General hospitals	37	450	487	....	38	38	.....	84.44	78.03
Alaska	60	1,141	1,201	....	29	29	.....	25.42	24.15
Panama Canal Zone	44	797	841	....	157	157	.....	196.99	186.68
Hawaiian Department	268	6,130	6,398	4	562	566	14.93	91.68	88.47
China	46	1,216	1,262	....	275	275	.....	226.15	217.91
Philippine Islands (American troops)	656	11,188	11,844	4	1,672	1,676	6.10	149.45	141.51
District of Luzon	491	9,201	9,692	4	1,489	1,493	8.15	161.83	154.04
District of Mindanao	153	1,896	2,049	....	109	109	.....	57.49	53.20
Department Hospital, Manila	11	83	94	....	72	72	.....	867.47	765.96
Interisland transports	1	8	9	....	2	2	.....	250.00	222.22
Army transports	61	686	747	....	41	41	.....	59.77	54.89
Philippine Scouts	.....	5,096	.....	....	185	.....	.....	36.30	.....
Porto Rican regiment (enlisted men)	.....	594	.....	....	46	.....	.....	77.44	.....

Table No. 17 gives the relative standing and rates with reference to venereal disease for 51 posts in the United States. The standing of the post is also shown in this table for the preceding year. The post standing first and having the greatest rate for venereal disease is Fort Oglethorpe, Ga., with a rate of 234.04. This post was No. 4 last year with a rate of slightly over 200.

Fort McPherson, Ga., which had the unenviable distinction of standing first on this list in 1911 and in 1912, with a rate for the latter year of 289, is now No. 10 with a rate of 115.69. The same reason was there both periods and the greatly improved rate is an indication of what can be effected by a close adherence to orders, backed up by interest and earnestness. There appears to be no defense for such a rate as 234.04 shown at Fort Oglethorpe, Ga., in 1913. It is 53 points higher than the next post, a difference that is equal to or higher than the rate for any of the 13 lower posts in this table.

Fort Ethan Allen, Vt., which was No. 26 on the list last year with a rate of 107.63, is now second with a rate of 181.54.

A most marked improvement has been shown by Madison Barracks, N. Y., with a rate of 52.23, last year it had a rate of 170.09; Fort Meade, S. Dak., a rate of 17.54, last year had a rate of 119.15; Fort Washington, Md., a rate of 91.60, last year had a rate of 216.43. The rate for the United States is 81.75, and there appears to be no good reason why any post in the United States should have a rate exceeding or even approximating 100. The same measures that have been effective in the posts with low rates will show the same results when applied with equal care and energy in the posts now showing high rates.

The department surgeon of the Eastern Department, in his annual report for 1913, makes the following statement with reference to the problem of venereal disease in the Army:

> While venereal diseases have been materially decreased under the provisions of General Orders 17, War Department, 1912, since they went into force, it is believed that a further decrease can be secured by the use of the prophylactic tubes in addition to the dispensary treatment. There is no proof that the dispensary method is effective if used six hours or more after contact, which interval occurs frequently with men unable to return from pass or absence in a less period on account of transportation facilities or distance of neighboring towns from such posts. These tubes, to be used by the men immediately after contact, should be obtained by the organization commander and issued gratuitously in such cases. Experience has proven that men will not purchase tubes from post exchanges to any great extent.

It is interesting to note in connection with the above the following observation made by the same officer:

> The noneffective rate for alcoholism per thousand of strength was 0.162 as compared with 0.205 for 1913, and the admission rate per thousand of strength was 15.37 as against 17.69 for 1913. These are the lowest rates for alcoholism attained in territory embraced in this department.

Further, in speaking of the prevention of malaria he states, with reference to the Canal Zone:

> It is understood that the extending of Gatun Lake has changed the physical conditions near Las Cascadas and in part accounts for the presence of the anopheles, and thus explains the increase in malarial fevers. The necessity of guarding the locks of the canal is said by the commanding officer of the Tenth Infantry to account for some cases, it being at times impracticable to properly protect the men. Besides, the health department of the Zone has turned over the sanitation of that reservation to the military authorities there, and the issue of a sufficient quantity of crude petroleum and the proper larvicide was delayed until some time after such transfer was effected. Both of these conditions are being met and it is expected that the disease will in a measure be controlled as far as it is possible to do so in that climate.

MALARIAL FEVERS.

The occurrence of malarial fever in the United States, as shown in the chart R, continues to decrease. The admission rate for 1913 was 8.79, as compared with 14.22 for 1912, 14.68 for 1911, 16.36 for 1910,

and 23.06 for 1909. The rate this year is the lowest on record in this office, and also the most marked annual reduction since 1910. The noneffective rate is still more impressive, being a little over one-half of that for 1912 and was 0.18 per 1,000, as compared with 0.30 in 1912, 0.35 in 1911, 0.36 in 1910, and 0.51 in 1909.

Table No. 19 shows the relative incidence of the various forms of malarial infection for the past five years. Two deaths this year occurred in the Army in the Philippines, the first from malarial fever since 1906. Both cases were in the persons of American soldiers who were infected with the estivo-autumnal form of parasite.

TABLE NO. 19.—*Malarial infections—United States, continental (excluding Alaska), years 1909 to 1913, inclusive, enlisted men.*

[Ratio per 1,000 of mean strength.]

Malarial fevers.	Admitted.			Discharged on certificate of disability.			Died.			Noneffective.		
	Total.	White.	Colored.	Total.	White.	Colored.	Total.	White.	Colored.	Total.	White.	Colored.
Quartan and tertian:												
1913	7.31	7.50	1.18	.....	.....	.....	.....	.....	.....	0.13	0.14	0.01
1912	12.42	12.89	2.01	.....	.....	.....	.....	.....	.....	.24	.25	.04
1911	13.63	14.36	.68	.....	.....	.....	.....	.....	.....	.29	.30	.01
1910	14.57	15.18	3.68	.....	.....	.....	.....	.....	.....	.28	.29	.06
1909	20.29	20.74	7.65	.....	.....	.....	.....	.....	.....	.41	.42	.13
Estivo-autumnal:												
1913	.67	.69	.....	.....	.....	.....	.....	.....	.....	.02	.02	.....
1912	.96	1.00	.....	.....	.....	.....	.....	.....	.....	.03	.03	.....
1911	.89	.94	.....	.....	.....	.....	.....	.....	.....	.04	.04	.....
1910	1.36	1.39	1.00	.....	.....	.....	.....	.....	.....	.05	.05	.03
1909	1.96	1.99	1.02	.....	.....	.....	.....	.....	.....	.07	.07	.03
Malarial cachexia and undetermined malarial fevers:												
1913	.81	.64	6.49	0.02	0.02	.....	.....	.....	.....	.02	.02	.11
1912	.84	.77	2.41	.....	.....	.....	.....	.....	.....	.02	.02	.02
1911	.16	.17	.....	.....	.....	.....	.....	.....	.....	.02	.02	.....
1910	.43	.46	.....	.....	.....	.....	.....	.....	.....	.03	.03	.....
1909	.80	.83	.....	.02	.02	.....	.....	.....	.....	.04	.04	.....
Total malarial diseases:												
1913	8.79	8.82	7.67	.02	.02	.....	.....	.....	.....	.18	.18	.12
1912	14.22	14.65	4.42	.....	.....	.....	.....	.....	.....	.30	.31	.06
1911	14.68	15.47	.68	.....	.....	.....	.....	.....	.....	.35	.36	.01
1910	16.36	17.02	4.69	.....	.....	.....	.....	.....	.....	.36	.37	.09
1909	23.06	23.57	8.67	.02	.02	.....	.....	.....	.....	.51	.53	.16

TABLE NO. 20.—*The 10 posts of more than 200 (officers and men) in the United States having the highest admission rates for malarial diseases, 1913 compared with 1912.*

[Ratio per 1,000 of mean strength.]

Posts.	Mean strength.		Malarial diseases, total ratio.	
	1913	1912	1913	1912
Fort Howard, Md	448	456	60.27	46.05
Fort Caswell, N. C	318	337	44.03	38.58
Washington Barracks, D. C	673	649	41.60	84.75
Fort Washington, Md	393	499	35.62	172.34
Jefferson Barracks, Mo	1,110	1,224	34.23	90.69
Fort Logan H. Roots, Ark	320	264	28.12	90.91
Fort McPherson, Ga	752	761	21.28	14.45
Fort Oglethorpe, Ga	705	845	17.02	14.20
Fort Omaha, Nebr	243	271	16.46	.....
Fort Bliss, Tex	712	567	15.45	58.21

The most interesting change in Table No. 20 for this year is that Fort Washington, Md., no longer heads the list of posts in the United States with high malarial rates. The intelligent and earnest work done at that post during the last two years is showing its result in a rate which has been reduced to 35.62 for 1913. As shown in the table it was 172.34 for 1912.

Comparatively recently it has been discovered that mosquitoes were breeding in the catch basins and wells and also in eave troughs that did not completely discharge all rain water reaching them. Measures have been taken to destroy these breeding places by correcting faulty drainage and screening wells that mosquitoes may no longer be able to reach them. With these improvements carried out it is confidently expected that future rates for that post will be even lower. However, as the inhabitants of the surrounding country are probably infected with malaria, there will always be danger of the soldiers acquiring this disease while visiting in the neighborhood. This same condition of affairs prevails in all places in which our troops are stationed where the inhabitants are living on lower sanitary planes than the garrisons. The surgeons for the last four or five years at Fort Washington deserve commendation for this persistent fight against this disease. They have been supported by the commanding officer and quartermasters, and it is now hoped that the opprobrium under which this post has labored for so long as the most highly malarious in the service is permanently removed. It is regretted that posts which last year were not shown in this table are now found there. Fort Howard has the unenviable distinction of having the highest rate of any post in the United States, showing a decided increase over last year when it was seventh on the list. The first four posts in this table for last year have for 1913 lower rates than Fort Howard, though last year it will be observed that the rates for all of them were over 40 per cent higher than the rate shown for Fort Howard for 1913.

Fort Ontario, N. Y., does not appear in this list this year, its place being taken by Fort Oglethorpe, Ga. Generally speaking, however, the rates at these leading posts are much lower than for the previous year, though the first five are still much too high under any circumstances.

The total admission rate for malarial fever in the Army was 24.75, as compared with the rate for 1912, which was 40, and for 1911 which was 25.18. This shows a slight reduction over the rate for 1911 in spite of the marked increase in 1912, due largely, it is thought, to the field service conditions existing in the Philippines in that year. It is possible that there were other factors, climatological in character, that assisted in this increase in the Philippines for 1912, and of which we may not have been aware.

A new chart (Y) is shown this year which gives the comparative rates for the decade prevailing among the American troops in the Philippines and the Scouts (Filipino soldiers). It will be observed that the rate among the native troops is considerably in excess of that among the American troops serving in the Philippines. This is, of course, to be expected as the sanitary plane upon which the American troops live is higher than that for the Scouts. While the rate for both classes of troops showed a regular and almost equal rate of decrease from 1905 to 1909 the rate for the Scouts increased some-

what for 1910, and remained practically constant until 1913, when a rate is shown slightly less than that for 1909. The rate for the American troops continued to increase until 1911, when, for the reasons mentioned above and possibly for others, it more than doubled in 1912 over what it was in 1911. While the rate for 1913 shows a marked decrease over the previous year, it is about the same as for the year 1909. The conditions of field service have been practically the same for the Scouts since 1907. Within recent years some posts formerly occupied by American troops have been taken over by the Scout garrisons, and they in this way have acquired barracks and surroundings that give them better protection from malarial diseases. The significant feature of this chart is, of course, the persistently higher rate among the native troops. The closer relations between the Scouts and the surrounding inhabitants increases the possibility of their being infected with the diseases prevailing among civilians, and it can not be expected, irrespective of field service, that the malarial rate among our native troops in the Philippines can ever be as low as that among troops not equally exposed. The native house of even the better class is difficult to make mosquito proof, and, in fact, it is seldom tried. As long as natives do not generally use mosquito bars while sleeping—the native soldier spending much of his time in native houses—they will be constantly acquiring malaria no matter how thorough the precautions taken against malaria in the barracks may be. The lower rate among the American troops certainly demonstrates the efficacy of measures taken against mosquitoes and would seem to point to the desirability of a campaign of education among the natives of the Philippines with a view to reducing mosquito-borne diseases.

TUBERCULOSIS.

The following tabulation shows for the total American Army, and separately for the different countries where the Army has been stationed continually, the case rate for tuberculosis (all forms) for enlisted men for the last five years. In this tabulation all readmissions during each year have been eliminated, so that the actual occurrence of tuberculosis (all) is shown:

Tuberculosis (all)—enlisted men, case rates only.

Year.	United States.	Philippine Islands.	Alaska.	Hawaii.	Transports.	Panama.	China.	Total.
1913	3.07	6.70	1.75	4.24	4.37	3.76	3.29	3.66
1912	3.25	5.02	4.18	2.07	2.74	.....	.....	3.49
1911	3.64	3.77	2.68	1.99	1.76	.....	.....	3.55
1910	3.34	5.46	1.85	4.10	0.80	.....	.....	3.65
1909	4.53	5.06	3.76	2.96	3.00	.....	.....	4.53
1908	3.99	6.10	2.96	3.92	3.46	.....	.....	4.39

It is important to know that for the year 1913, as shown in the tabulation, the rate for tuberculosis in the United States is lower than for any previous year recorded, being 3.07. The general rate for the American Army was 3.66, or about the same as that for 1910, being higher than the rate for 1911 and 1912. The increase in the

rate is very small, and a study of the table will show that it is due to the increase in the rate among our troops in the Tropics, notably the Philippine Islands and Hawaii. As our troops in Panama and China have been there for a comparatively short time, a comparison of rates is not available, nor would it indicate anything of importance. All these places, except Alaska, have higher rates than that for the United States. The number of troops in Alaska and on transports is so small that these rates can be ignored. The actual number of cases of tuberculosis on transports was three, the same number as for 1912, the difference in the rate being due to a smaller mean strength in 1913. The figures for Hawaii become of more importance since our garrison there was increased about 45 per cent. To summarize them the rate for the United States is encouragingly low. The general rate for the Army, slightly higher than for the past two years, is due, apparently, to increases in the rates for our troops in tropical countries.

The following tabulation shows for the total American Army and for that part stationed in the United States and the Philippine Islands, the rate for tuberculosis (all), for discharges for disability for deaths, and noneffectiveness for the last three years:

	Year.	Discharged for disability.	Deaths.	Noneffective.
Army, American troops	1913	2.26	0.49	1.94
	1912	1.56	.31	1.40
	1911	2.88	.44	1.35
American troops, United States	1913	2.16	.40	2.34
	1912	1.67	.27	1.65
	1911	2.85	.52	1.63
American troops, Philippine Islands	1913	3.95	.79	.56
	1912	1.46	.57	.53
	1911	3.77	.08	.29

An examination of Table No. 21, giving the occurrence of tuberculosis at Army posts in the United States, shows that Vancouver Barracks had the largest number of cases in 1913, as in 1912 and 1911, although its rate for 1913 was less than one-half of that of the other years.

TABLE NO. 21.—*Tuberculosis (all) at Army stations, United States, continental (excluding Alaska), year 1913, compared with 1912 and 1911, enlisted men.*

	Admissions.					
	1913		1912		1911	
	Number.	Ratio per 1,000 of mean strength.	Number.	Ratio per 1,000 of mean strength.	Number.	Ratio per 1,000 of mean strength.
Vancouver Barracks, Wash	10	8.16	23	17.58	22	21.96
Fort Leavenworth, Kans	5	5.24	5	2.52	2	1.63
Fort Slocum, N. Y	5	4.70	11	8.64	3	2.44
Columbus Barracks, Ohio	5	4.31	8	6.83	6	4.72
Fort Du Pont, Del	4	8.03	1	1.84	3	7.21
Fort Hamilton, N. Y	4	7.60	.....	.....	5	11.06
Fort Williams, Me	4	7.18	2	3.45	.....	.....
Fort Douglas, Utah	4	5.34	1	1.22	1	2.17

TABLE No. 21.—*Tuberculosis (all) at Army stations, United States, continental (excluding Alaska), year 1913, compared with 1912 and 1911, enlisted men*—Continued.

	Admissions.					
	1913		1912		1911	
	Number.	Ratio per 1,000 of mean strength.	Number.	Ratio per 1,000 of mean strength.	Number.	Ratio per 1,000 of mean strength.
Jefferson Barracks, Mo	4	3.68	8	6.66	2	1.66
Presidio of Monterey, Cal	4	3.75	7	8.86	1	1.32
Fort Sam Houston, Tex	4	3.37	10	9.65	5	3.10
Fort Worden, Wash	4	2.82	.....	.....	2	3.19
Presidio of San Francisco, Cal	4	2.26	7	3.66	11	5.60
Walter Reed General Hospital, Takoma Park, D. C	3	34.89	3	19.11	3	21.43
Fort McIntosh, Tex	3	8.31	2	8.30	3	9.49
Fort Ethan Allen, Vt	3	4.89	2	2.65	3	3.88
Fort McDowell, Cal	3	3.95	6	9.13	6	7.52
Plattsburg Barracks, N. Y	3	4.03	1	1.29	1	1.31
Fort Monroe, Va	3	2.87	1	.81	1	.93
Letterman General Hospital, San Francisco, Cal	2	11.83	.....	.....	11	41.20
Fort Hancock, N. J	2	2.89	4	5.51	.....	.....
Fort McPherson, Ga	2	2.77	3	4.12	.....	.....
Fort Andrews, Mass	1	2.54	4	9.52	1	2.39
Fort Benjamin Harrison, Ind	1	5.95	4	5.71	1	5.59
Fort Riley, Kans	1	.80	3	1.61	2	1.10
General Hospital, Fort Bayard, N. Mex	1	7.09	1	7.81	8	64.00
Fort Baker, Cal	1	3.51	2	5.18	4	10.84
Fort Adams, R. I	1	1.89	1	1.81	3	5.43
Fort George Wright, Wash	1	1.96	1	1.89	3	6.40
Fort Logan, Colo	1	1.77	2	3.19	3	5.24
Fort Totten, N. Y	1	1.35	.....	.....	3	4.72
Fort Myer, Va	1	1.79	2	2.93	2	3.07
Fort Porter, N. Y	1	4.78	2	10.99	2	8.73
Fort Robinson, Nebr	1	1.63	2	3.60	1	2.15
Fort Snelling, Minn	1	2.46	.....	.....	1	2.17
Fort Des Moines, Iowa	1	6.85	1	1.45	.....	.....
Fort D. A. Russell, Wyo	.....	.....	4	1.83	7	4.29
Fort Flagler, Wash	.....	.....	4	13.25	1	3.18
Madison Barracks, N. Y	.....	.....	.....	.....	4	8.06
Fort Barry, Cal	.....	.....	3	9.65	.....	.....
Fort Jay, N. Y	.....	.....	3	8.17	1	3.39
Fort Barrancas, Fla	.....	.....	2	3.71	3	6.45
Fort Lincoln, N. Dak.[1]	.....	.....	.....	.....	3	11.67
Fort Mackenzie, Wyo	.....	.....	2	3.68	3	8.77
Fort Oglethorpe, Ga	.....	.....	1	1.25	3	9.84
12 posts not included above had 2 cases each in 1913	24	.....	.....	.....	.....	.....
8 posts not included above had 2 cases each in 1912	.....	.....	16	.....	.....	.....
12 posts not included above had 2 cases each in 1911	.....	.....	.....	.....	24	.....
23 posts not included above had 1 case each in 1913	23	.....	.....	.....	.....	.....
17 posts not included above had 1 case each in 1912	.....	.....	17	.....	.....	.....
11 posts not included above had 1 case each in 1911	.....	.....	.....	.....	11	.....
Field, miscellaneous, etc	37	.....	8	.....	30	.....
Total	183	3.07	190	3.25	215	3.89

[1] Closed in March, 1913.

The total number of cases of tuberculosis is slightly smaller than in 1912. It is a matter of much satisfaction that the number at Vancouver Barracks, although larger than any other post, is not one-half of what it was in 1912 or 1911. Also that rates at Forts Porter, N. Y., Robinson, Nebr., Flagler, Wash., and Andrews, Mass., which were among the posts having higher rates in 1912, are about one-half this year of what they were then.

It is too early, the observation being limited to too short a time, to definitely account for the increase in the rate of tuberculosis in the Tropics, but it is not unlikely that it is associated with a longer tour of duty there than was heretofore customary. While there were many officers and soldiers who voluntarily remained in the Tropics for a

number of years, they did so only after a physical examination and only when they felt able to volunteer to do so. The lengthening of the tour of duty leaves no choice in the matter, and it would not be at all surprising to find, in the course of time, a constantly higher rate—other things being equal—for troops serving longer tours in tropical countries. The constantly decreasing rate for tuberculosis in the United States tends to refute the attacks made on the system of immunization against typhoid in vogue in the Army since 1911.

TABLE No. 22.—*Occurrence of tuberculosis (all) among American troops, Army, year 1913, by years of service—Enlisted men.*

	Year of service.						Total.
	First.	Second.	Third.	Fourth.	Fifth.	Sixth and over.	
United States, continental (excluding Alaska):							
Mean strength							59,608
Admitted	38	39	21	13	17	55	183
Ratio per 1,000 of mean strength							3.07
Duty	2	8	2	2		5	19
Died	2	5		3	2	5	17
Discharged on certificate of disability	16	8	7	4	12	16	63
Otherwise	3	2					5
Remaining Dec. 31, 1913	15	16	12	4	3	29	79
Philippines:							
Mean strength							11,188
Admitted	12	28	7	2	7	19	75
Ratio per 1,000 of mean strength							6.70
Duty	1	1			1	3	6
Died	1	3	1		1	2	8
Discharged on certificate of disability	6	6	2	1	3	2	20
Otherwise		1				2	3
Remaining Dec. 31, 1913	4	17	4	1	2	10	38
Alaska:							
Mean strength							1,141
Admitted		1			1		2
Ratio per 1,000 of mean strength							1.75
Remaining Dec. 31, 1913		1			1		2
Hawaii:							
Mean strength							6,130
Admitted	10	7	1	1		7	26
Ratio per 1,000 of mean strength							4.24
Died		3				2	5
Discharged on certificate of disability	1					1	2
Remaining Dec. 31, 1913	9	4	1	1		4	19
Canal Zone, Panama:							
Mean strength							797
Admitted	1		1			1	3
Ratio per 1,000 of mean strength							3.76
Duty			1				1
Remaining Dec. 31, 1913	1					1	2
China:							
Mean strength							1,216
Admitted				1		3	4
Ratio per 1,000 of mean strength							3.29
Died						1	1
Remaining Dec. 31, 1913				1		2	3
Transports:							
Mean strength							686
Admitted	2		1				3
Ratio per 1,000 of mean strength							4.37
Discharged on certificate of disability	1						1
Remaining Dec. 31, 1913	1		1				2
Total, Army:							
Mean strength							80,766
Admitted	63	75	31	17	25	85	296
Ratio per 1,000 of mean strength							3.66
Duty	3	9	3	2	1	8	26
Died	3	11	1	3	3	10	31
Discharged on certificate of disability	24	14	9	5	15	19	86
Otherwise	3	3				2	8
Remaining Dec. 31, 1913	30	38	18	7	6	46	145

UNDETERMINED FEVERS.

The admission rate for these fevers for the United States was 2.65 per 1,000, as compared with 1.94 for 1912, 2.50 for 1911, and 2.42 for 1910. In this connection, it should be remembered that in questions of doubt procedures as used in the laboratory diagnosis of typhoid and paratyphoid are carried out to exclude any possibility of overlooking these two diseases. It is, therefore, extremely improbable that any of the undetermined fevers were due to either of these two causes.

TABLE NO. 23.—*Undetermined fevers, 1913, American troops, by countries—Enlisted men.*

Diseases.	United States (continental), excluding Alaska.	Alaska.	Hawaii.	Philippine Islands.	Canal Zone, Panama.	China.	Army transports.	Total.
Febricula	32	2	5	9	.....	1	.....	49
Fever, simple continued	57	.....	2	4	2	.....	.....	65
Fever, type undetermined	66	1	1	46	.....	.....	.....	114
Ephemeral fever	3	.....	.....	.....	.....	.....	.....	3
Total	158	3	8	59	2	1	.....	231
Ratio per 1,000 mean strength	2.65	2.63	1.31	5.27	2.51	0.82	.....	2.86

MENTAL ALIENATION.

It is impracticable to compare the admission rate for this class of disturbances with the rate for diseases formerly classified and published under the term "insanity." The diseases included under the term "Mental alienation" used in the present nomenclature, which was put into use January 1, 1912, include several conditions not included under the term insanity, such as defective mental development, constitutional psychopathic state, hypochondriasis, and nostalgia. The case admission rate for this class of diseases was 2.92 per 1,000, and the discharge rate was 2.24.

ALCOHOLISM.

The admission rate for alcoholism in the United States for the year 1913 was 14.24, which is a further improvement over the preceding year, when it was 16.67. It is gratifying to observe that this rate has shown a steady diminution since 1907 following an equally steady rise for eight years before 1907. It is interesting to note that the rate for 1913 is the lowest for any year since 1870. This progressive improvement rather strengthens the contention of those who disapprove the restoration of the canteen. This matter, after all, appears to be closely associated with the public attitude with reference to alcoholic drinks. It would appear that the opinion of the country is generally setting away from alcohol in any form as a beverage. While "near beer," supposed to contain not more than 2 per cent of alcohol, is still sold at some posts, it is thought that even

this will no longer be much in demand. It is believed that the Army will be well rid of any system of supplying alcoholic drinks. There really appears to be no more reason why they should be sold on Government reservations to soldiers than there now appears to us to be any reason for the regulation issue of grog of former days.

These rates do not represent the amount of intemperance existing in the Army, but as they are all calculated from similar data—that is, the number of cases in which medical assistance was invoked to avert danger—they are useful as indices of alcoholic excess. This marked decrease in the admission rate for 1913 is believed to be largely due to the effect produced by the act of Congress stopping the pay of officers and enlisted men when incapacitated for duty on account of sickness due to drug addiction, alcoholism, or other misconduct.

SMALLPOX.

Only 2 cases of smallpox occurred during the year. There was no death. In 1912 there were 6 cases without a death. Recent War Department orders relative to revaccination will, it is hoped, make more thorough the protection afforded by vaccination.

MEASLES.

During the year 1913, 457 cases of measles occurred in the United States, with 11 deaths and 1 discharge. In 1912 there were 426 cases, with 12 deaths and 6 discharges. A threatened epidemic of possibly serious proportions, similar to that occurring two years ago at Columbus Barracks, was avoided there by the prompt measures taken by the surgeon and the prompt cooperation of The Adjutant General's Office in diverting to other recruit depots all the applicants for enlistment usually sent to Columbus Barracks for a period of nearly two months.

CEREBROSPINAL MENINGITIS.

Thirty-two cases of this disease, with 11 deaths, occurred in the Army in the United States during 1913.

INFLUENCE OF STATION.

The posts having the highest noneffective rate this year are Forts Morgan, Ala.; Sam Houston, Tex.; and Bliss, Tex., the rates being, respectively, 42.73, 40.58, and 39.97. Each case admitted to hospital at Fort Morgan remained on sick report for an average of 13.35 days.

The posts having the highest admission rate for the year are Fort Morgan, Ala.; Jackson Barracks, La.; and Fort Oglethorpe, Ga., in the order named. The rates were 1,168.50, 1,077.59, and 984.40 per 1,000. The average number of days treatment for each case at Fort Morgan was 13.35; Jackson Barracks, 6.40; and Fort Oglethorpe, 9.87.

The three posts having the lowest noneffective rate for the year are Forts Hamilton, N. Y.; Williams, Me.; and Barry, Cal., the rates being 6.89, 7.32, and 7.86. The average number of days treatment for each case at these posts was, respectively, 6.33, 6.82, and 5.72.

Chart R

Malarial Fevers, Undetermined Fevers, Typhoid Fever.
Admission Rates.

Admission rates for Malarial Fevers, Undetermined Fevers, Typhoid Fever, for the United States, American Troops {enlisted men} years, 1904-1913.

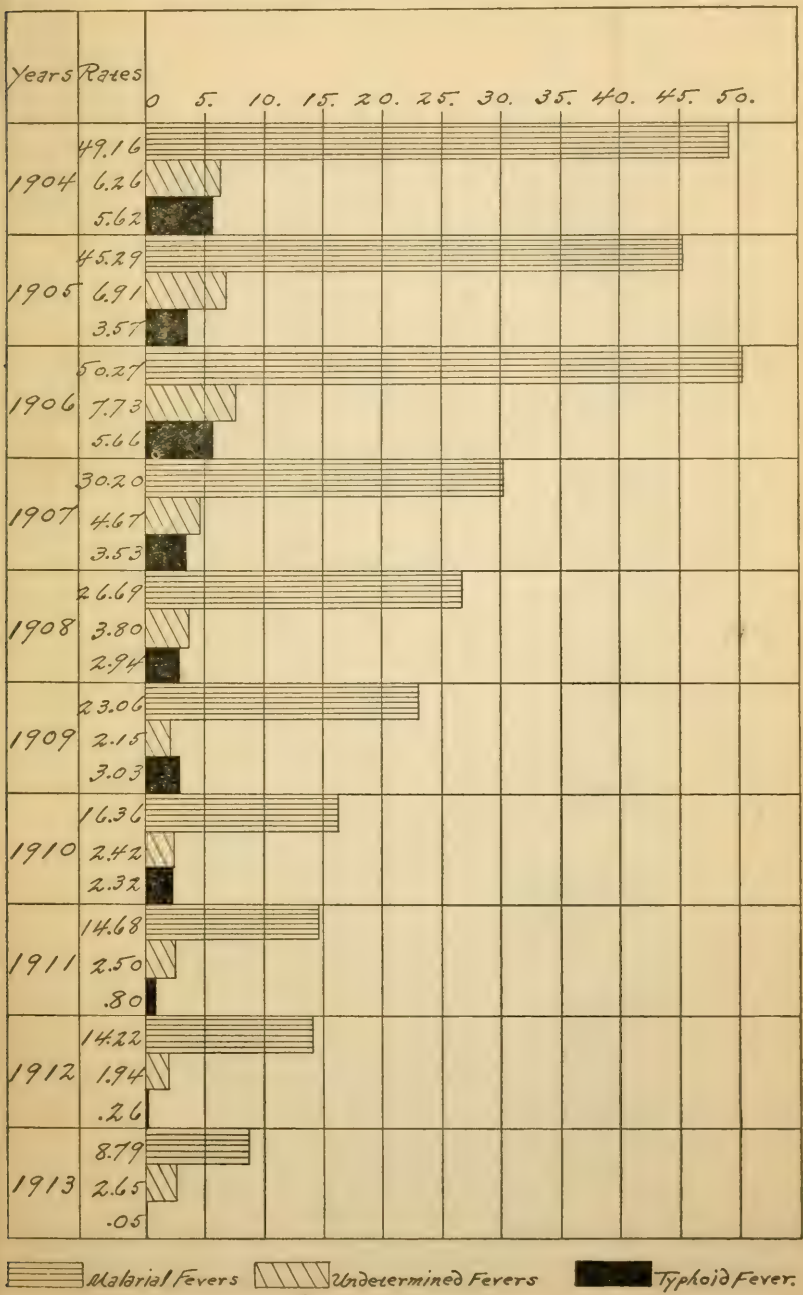
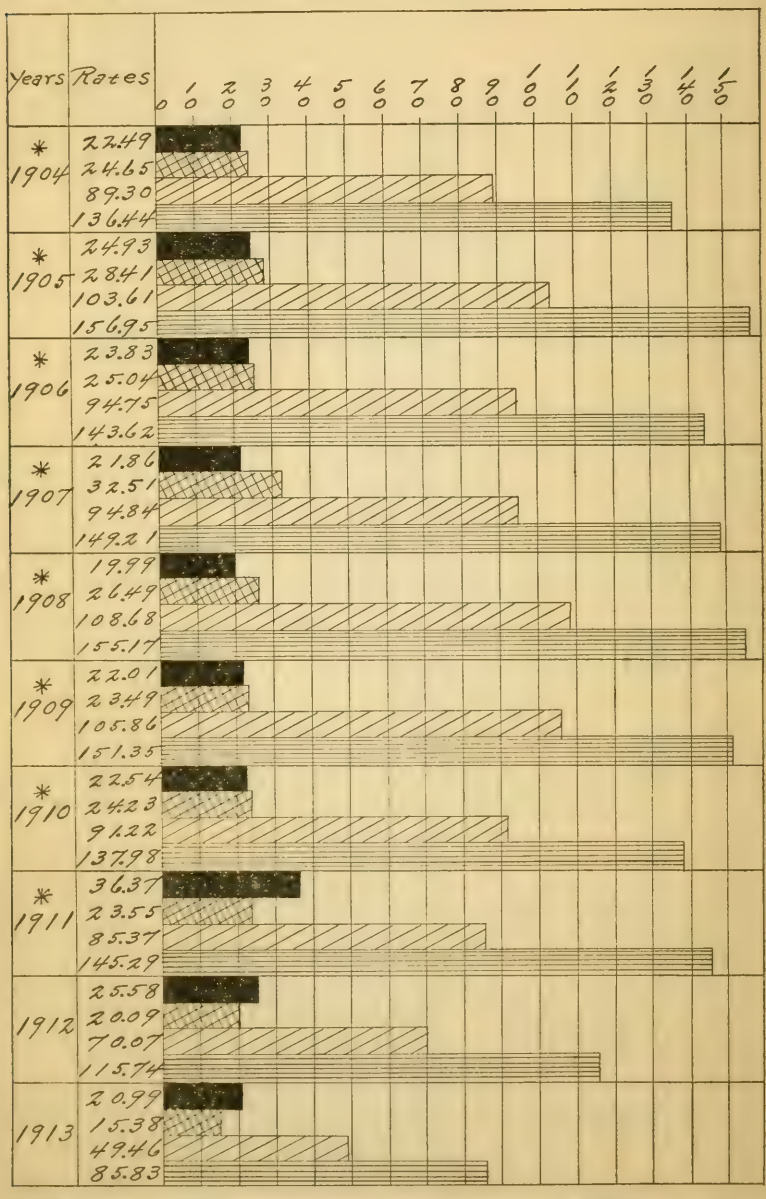


Chart 5.

Syphilis, Chancroid, Gonorrhea and Total Venereal.
Admission Rates.

Admission rates for Syphilis, Chancroid, Gonorrhea, and Total Venereal for the United States, American Troops {enlisted men} years, 1904-1913.



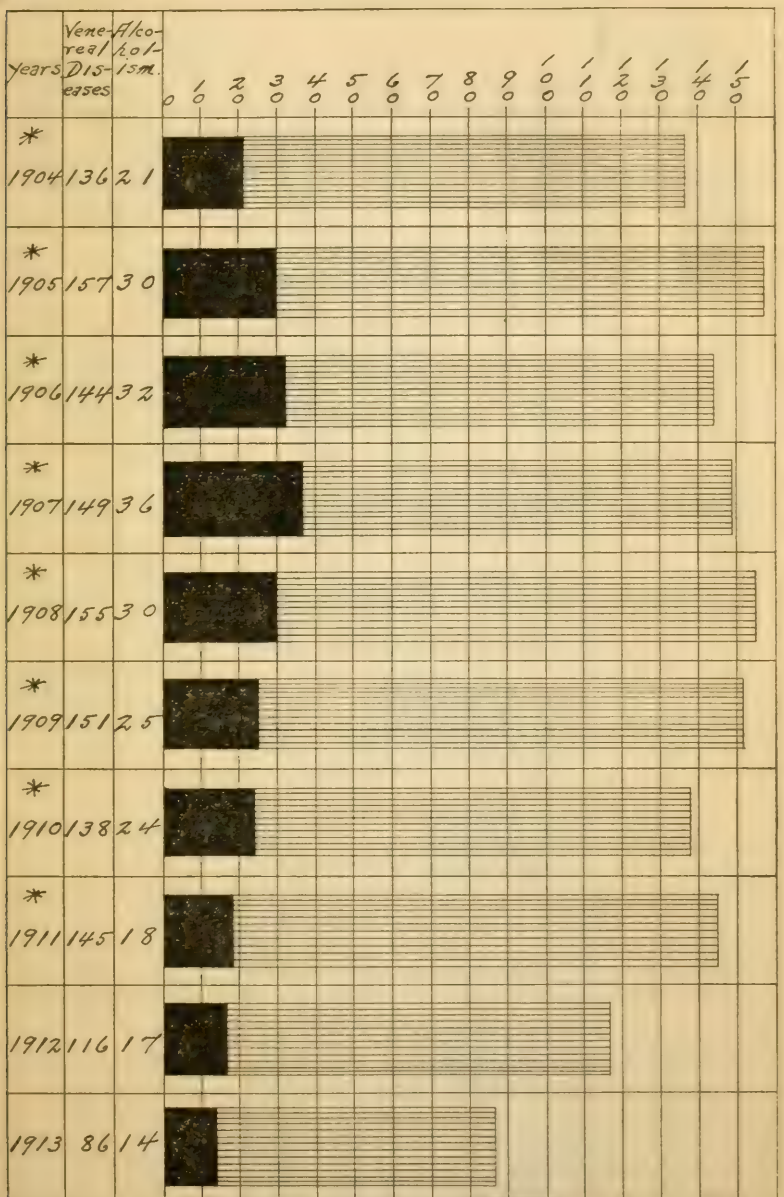
* Readmitted cases deducted to correspond with figures for years preceding 1904, and 1912-1913.

Chart T.

Venereal Diseases and Alcoholism.

Admission Rates.

Admission rates for Venereal Diseases and Alcoholism for the United States, American Troops {enlisted men} Years, 1904–1913.



Readmitted cases deducted to correspond with figures for years preceding 1904, and 1912–1913.

Chart U

Malarial Fevers.

Admission and Noneffective Rates

Admission and Noneffective rates for Malarial Fevers for the United States, American Troops, {enlisted men} years, 1904–1913.

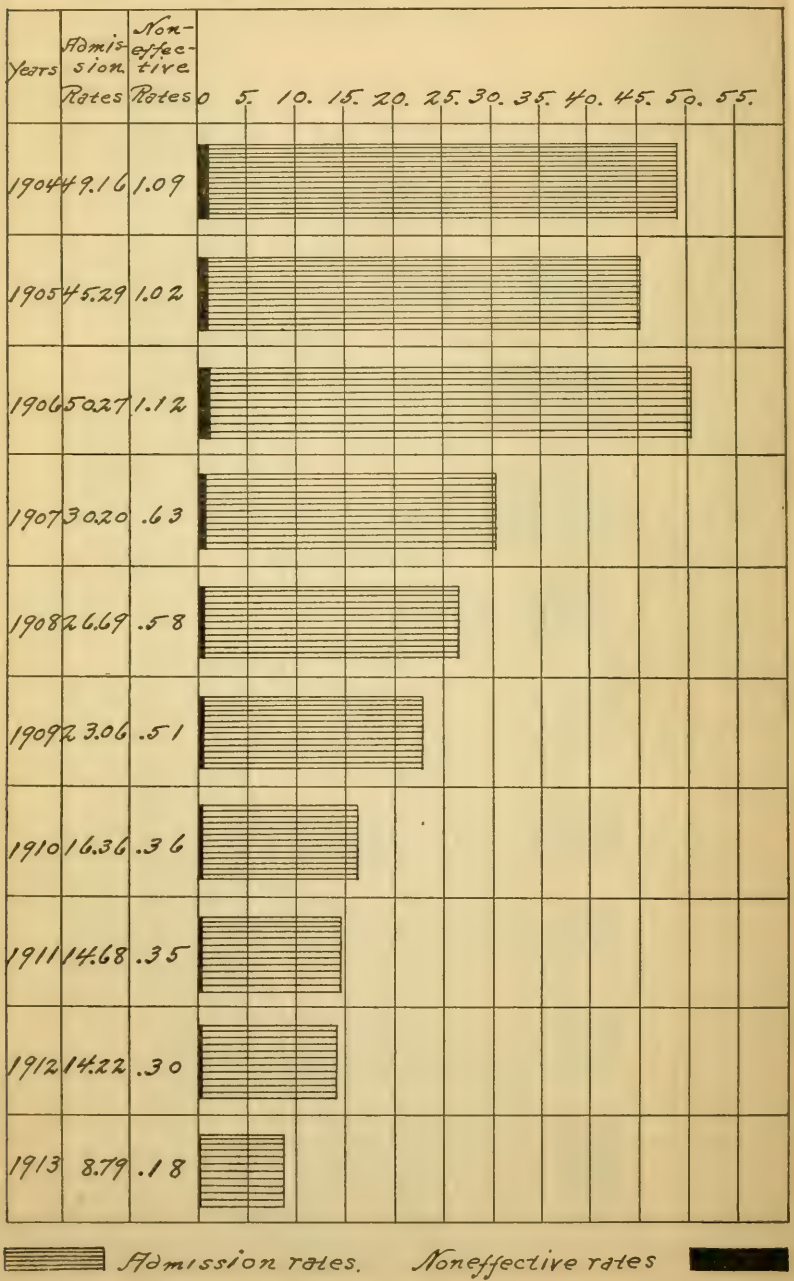
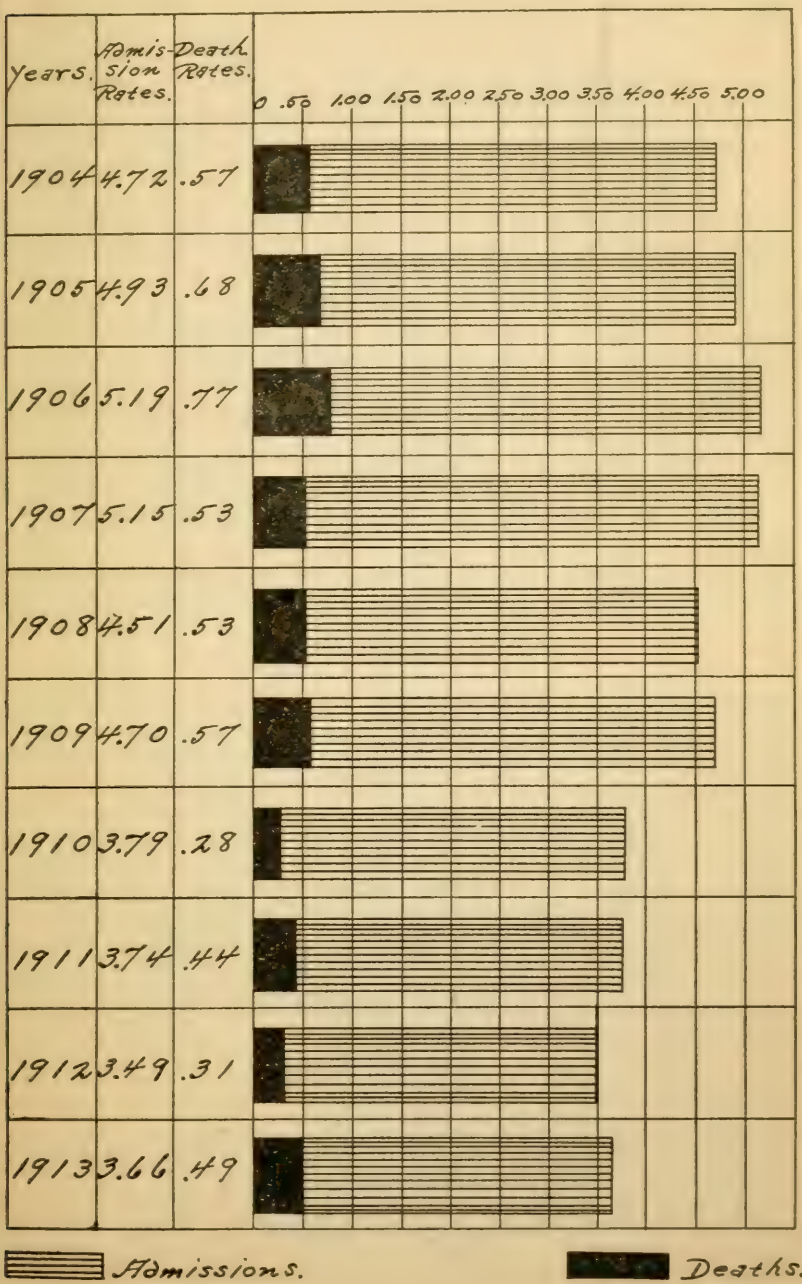


Chart V.

Tuberculosis.

Admission and Death Rates.

Admission and Death rates for Tuberculosis for the Army, American Troops {enlisted men} 1904–1913.



The three posts having the lowest admission rate were Forts Lawton, Wash.; Adams, R. I.; and Madison Barracks, N. Y., with rates, respectively, of 270.89, 366.79, and 379.42. The noneffective rate for Fort Lawton is 7.98; Fort Adams, 9.46; and Madison Barracks, 13.14. The average number of days for each case was: Lawton, 10.75; Adams, 9.41; and Madison Barracks, 12.64.

Of the recruiting depots, Fort Slocum, N. Y., had the highest noneffective rate, 56.42, and Fort McDowell, Cal., the lowest, 18.47; Jefferson Barracks, Mo., had the highest average number of days treatment for each case, 13.21, and Fort McDowell, Cal., the lowest, 9.27. Fort Slocum had the highest admission rate, 1,607.54, and Fort McDowell the lowest, 727.86. The highest death rate occurred at Columbus Barracks, Ohio, 11.80 per 1,000, and the lowest at Fort Slocum, N. Y., 2.76.

The Western Department had the lowest noneffective rate, this being 10.02 per 1,000, as compared with 14.96 for the Eastern, 19.07 for the Central, and 27.70 for the Southern.

The Western Department had the lowest admission rate, being 499.14 per 1,000, as compared with 596.04 for the Eastern, 620.95 for the Central, and 651.82 for the Southern.

The Western Department had the lowest death rate, this being 3.52 per 1,000, as compared with 4.32 for the Eastern Department, 5.77 for the Southern, and 6.14 for the Central.

The Western Department had the lowest average number of days treatment for each case, this being 7.27, as compared with 9.21 for the Eastern Department, 11.11 for the Central, and 15.50 for the Southern.

Tables Nos. 24 and 25 show the posts having the highest and lowest ratios of admission and noneffectiveness in the United States as a whole.

INFLUENCE OF RACE.

The colored troops had higher rates than the white for noneffective, admissions, and discharges, being 54.08, 626.18, and 13.56, as compared with 22.68, 619.72, and 13.45. The death rate for white troops was, however, higher, being 4.96, as compared with 4.72.

For venereal diseases the rate for the colored troops was 106.13, and for the white 85.23; for alcoholism the rate for the white troops was 14.57, and for the colored 2.95; for tuberculosis (all kinds) the rate for colored was 5.31, and for white 3; for bronchitis the rate for colored was 31.25, and for white 28.72; for diarrhea and enteritis the rate for the white was 27.04, and for the colored 24.76; and for rheumatism, articular (all), the rate for white was 7.70, and for the colored 5.90. The relative prevalence of the other several diseases in the two races are shown in Table No. 71, at the end of the report.

TABLE NO. 24.—*Posts of the United States having the highest admission and noneffective rates per 1,000 of mean strength among all those having a total strength of over 200 officers and men, year 1913.*

	Mean strength.	Ratio per 1,000 of mean strength.												Average number of days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective rate.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
										From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.					
		From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
Posts in order of highest admission rates from all causes:																	
Fort Morgan, Ala	273	1,168.50	366.30	.....	.....	69.60	3.66	69.60	3.66	42.73	36.87	10.13	9.52	15.60	13.35	3.70	10.09
Jackson Barracks, La	232	1,077.59	797.42	8.97	8.97	.....	.....	8.97	8.97	18.88	18.30	11.88	11.43	6.89	6.40	4.34	5.46
Fort Oglethorpe, Ga	705	984.40	506.38	2.99	1.49	1.42	1.42	4.41	2.91	26.62	22.35	14.95	12.73	9.72	9.87	5.46	10.78
Fort Bliss, Tex	712	962.08	685.39	1.47	1.47	15.45	9.83	16.92	11.30	39.97	38.57	22.62	22.04	14.59	15.16	8.26	12.05
Fort Snelling, Minn	424	917.45	464.62	9.83	9.83	16.51	11.79	26.34	21.62	34.52	30.76	17.62	15.25	12.60	13.73	6.43	13.84
Posts in order of highest admission rates, excluding venereal diseases, injuries, etc.:																	
Jackson Barracks, La	232	1,077.59	797.42	8.97	8.97	.....	.....	8.97	8.97	18.88	18.30	11.88	11.43	6.89	6.40	4.34	5.46
Fort Bliss, Tex	712	962.08	685.39	1.47	1.47	15.45	9.83	16.92	11.30	39.97	38.57	22.62	22.04	14.59	15.16	8.26	12.05
Fort Mott, N. J	217	788.02	539.17	.....	.....	.....	.....	.....	.....	20.86	19.76	12.18	11.61	7.61	9.66	4.45	8.18
Fort Oglethorpe, Ga	705	984.40	506.38	2.99	1.49	1.42	1.42	4.41	2.91	26.62	22.35	14.95	12.73	9.72	9.87	5.46	10.78
Fort Washington, Md	393	852.42	501.27	.....	.....	2.54	.....	.....	.....	21.30	20.25	12.52	11.85	7.77	9.12	4.57	9.12
Posts in order of highest noneffective rates from all causes:																	
Fort Morgan, Ala	273	1,168.50	366.30	.....	.....	69.60	3.66	69.60	3.66	42.73	36.87	10.13	9.52	15.60	13.35	3.70	10.09
Fort Sam Houston, Tex	1,246	727.93	410.11	37.94	28.67	8.03	6.42	45.97	35.09	40.58	37.27	25.29	23.16	14.81	20.35	9.23	22.51
Fort Bliss, Tex	712	962.08	685.39	1.47	1.47	15.45	9.83	16.92	11.30	39.97	38.57	22.62	22.04	14.59	15.16	8.26	12.05
Fort Huachuca, Ariz	547	760.51	451.55	.....	.....	3.66	3.66	3.66	3.66	39.67	34.91	20.41	19.06	14.48	19.04	7.45	16.50
Fort Snelling, Minn	424	917.45	464.62	9.83	9.83	16.51	11.79	26.34	21.62	34.52	30.76	17.62	15.25	12.60	13.73	6.43	13.84
Posts in order of highest noneffective rates, excluding venereal diseases, injuries, etc.:																	
Fort Sam Houston, Tex	1,246	727.93	410.11	37.94	28.67	8.03	6.42	45.97	35.09	40.58	37.27	25.29	23.16	14.81	20.35	9.23	22.51
Fort Bliss, Tex	712	962.08	685.39	1.47	1.47	15.45	9.83	16.92	11.30	39.97	38.57	22.62	22.04	14.59	15.16	8.26	12.05
Fort Huachuca, Ariz	547	760.51	451.55	.....	.....	3.66	3.66	3.66	3.66	39.67	34.91	20.41	19.06	14.48	19.04	7.45	16.50
Fort Snelling, Minn	424	917.45	464.62	9.83	9.83	16.51	11.79	26.34	21.62	34.52	30.76	17.62	15.25	12.60	13.73	6.43	13.84
Fort D. A. Russell, Wyo	499	645.29	446.89	2.11	2.11	4.01	2.00	6.12	4.11	27.17	25.75	17.09	16.76	9.92	15.37	6.24	13.96

TABLE No. 25.—*Posts of the United States having the lowest admission and noneffective rates per 1,000 of mean strength among all those having a total strength of over 200 officers and men, year 1913.*

	Mean strength.	Ratio per 1,000 of mean strength.											Average number of days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective rate.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
										From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.					
		From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
Posts in order of lowest admission rates, from all causes:																	
Fort Lawton, Wash	395	270.89	154.43	.....	.....	2.53	2.53	2.53	2.53	7.98	7.76	4.33	4.18	2.91	10.75	1.58	10.23
Fort Adams, R. I	548	366.79	226.28	5.67	5.67	1.82	.....	7.49	5.67	9.46	8.39	5.10	4.40	3.45	9.41	1.86	8.23
Madison Barracks, N. Y	651	379.42	224.27	1.62	1.62	4.61	4.61	6.23	6.23	13.14	12.67	6.99	6.56	4.80	12.64	2.55	11.38
Fort Baker, Cal	295	379.66	220.34	.....	.....	3.39	.....	3.39	.....	10.63	8.78	5.55	4.88	3.88	10.22	2.03	9.20
Fort Monroe, Va	1,111	381.64	192.62	1.91	1.91	.90	.90	2.81	2.81	8.17	7.55	3.98	3.58	2.98	7.81	1.45	7.53
Posts in order of lowest admission rates, excluding injuries, etc.:																	
Fort Lawton, Wash	395	270.89	154.43	.....	.....	2.53	2.53	2.53	2.53	7.98	7.76	4.33	4.18	2.91	10.75	1.58	10.23
Fort Monroe, Va	1,111	381.64	192.62	1.91	1.91	.90	.90	2.81	2.81	8.17	7.55	3.98	3.58	2.98	7.81	1.45	7.53
Presidio of Monterey, Cal	1,130	389.38	216.81	.94	.94	3.54	.88	4.48	1.82	13.18	12.08	6.82	6.28	4.81	12.35	2.49	11.47
Fort Baker, Cal	295	379.66	220.34	.....	.....	3.39	.....	3.39	.....	10.63	8.78	5.55	4.88	3.88	10.22	2.03	9.20
Madison Barracks, N. Y	651	379.42	224.27	1.62	1.62	4.61	4.61	6.23	6.23	13.14	12.67	6.99	6.56	4.80	12.64	2.55	11.38
Posts in order of lowest noneffective rates from all causes:																	
Fort Hamilton, N. Y	548	397.81	255.47	1.90	.....	7.30	5.47	9.20	5.47	6.89	6.46	4.30	3.95	2.52	6.33	1.57	6.14
Fort Williams, Me	577	391.68	259.97	1.80	1.80	.....	.....	1.80	1.80	7.32	7.02	4.78	4.52	2.67	6.82	1.75	6.71
Fort Barry, Cal	401	501.25	374.06	.....	.....	4.99	.....	4.99	.....	7.86	6.55	5.47	4.93	2.87	5.72	2.00	5.34
Fort Lawton, Wash	395	270.89	154.43	.....	.....	2.53	2.53	2.53	2.53	7.98	7.76	4.33	4.18	2.91	10.75	1.58	10.23
Fort Monroe, Va	1,111	381.64	192.62	1.91	1.91	.90	.90	2.81	2.81	8.17	7.55	3.98	3.58	2.98	7.81	1.45	7.53

Posts in order of lowest noneffective rates, excluding injuries, etc.:																	
Fort Monroe, Va.	1,111	381.64	192.62	1.91	1.91	.90	.90	2.81	2.81	8.17	7.55	3.98	3.58	2.98	7.81	1.45	7.53
Fort Hamilton, N. Y.	548	397.81	255.47	1.90	.....	7.30	5.47	9.20	5.47	6.89	6.46	4.30	3.95	2.52	6.33	1.57	6.14
Fort Lawton, Wash.	395	270.89	154.43	.....	.....	2.53	2.53	2.53	2.53	7.98	7.76	4.33	4.18	2.91	10.75	1.58	10.23
Fort Williams, Me.	577	391.68	259.97	1.80	1.80	.....	.....	1.80	1.80	7.32	7.02	4.78	4.52	2.67	6.82	1.75	6.71
Fort Adams, R. I.	548	366.79	226.28	5.67	5.67	1.82	.....	7.49	5.67	9.46	8.39	5.10	4.40	3.45	9.41	1.86	8.23
RECRUIT DEPOTS.																	
Fort Slocum, N. Y.	1,088	1,607.54	1,010.11	82.79	68.67	2.76	1.84	85.55	70.51	56.42	53.42	37.38	35.64	20.59	12.81	13.65	13.51
Fort Logan, Colo.	584	1,376.71	893.84	90.42	62.06	8.56	6.85	98.98	68.91	40.73	31.70	27.00	22.11	14.86	10.80	9.85	11.02
Columbus Barracks, Ohio.	1,186	1,287.52	860.03	39.62	30.15	11.80	10.96	51.42	41.11	33.63	31.90	23.84	22.56	12.27	9.53	8.70	10.12
Jefferson Barracks, Mo.	1,110	888.29	581.08	59.55	36.96	7.21	7.21	66.76	44.17	32.14	31.82	21.38	21.19	11.73	13.21	7.80	13.43
Fort McDowell, Cal.	779	727.86	514.76	34.21	27.63	6.42	2.57	40.63	30.20	18.47	17.96	13.57	13.26	6.74	9.27	4.95	9.62

TABLE No. 26.—*Influence of disease on enlisted men, American troops, serving in the United States, by arms of service, for the year 1918.*

Arms of service.	Mean strength.	Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.	Ratio per 1,000 of mean strength.			
						Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.
Infantry	16,973	7,434	277	38	340.49	437.99	16.16	2.22	20.06
Cavalry	9,984	5,001	93	22	188.28	500.90	9.22	2.18	18.86
Field artillery	3,489	1,745	41	5	63.55	500.14	11.63	1.42	18.21
Coast artillery	14,702	6,870	199	35	243.72	467.28	13.40	2.36	16.58
Ordnance	644	310	10	2	10.64	481.37	15.36	3.07	16.52
Engineers	1,151	504	18	3	25.91	437.88	15.48	2.58	22.51
Signal corps	708	346	9	1	12.10	488.70	12.59	1.40	17.09
Hospital corps	2,441	1,084	48	13	46.07	444.08	19.46	5.27	18.87
All others	9,516	5,791	123	39	178.50	608.55	12.79	4.06	18.76
Total	59,608	29,085	718	158	1,109.26	487.94	11.92	2.62	18.61

TABLE No. 27.—*Influence of season, United States continental (excluding Alaska), year 1918—Enlisted men.*

Months.	Mean strength.	Ratio per 1,000 of mean strength.								Prevailing diseases (exclusive of venereal diseases, etc.).
		All causes.					Exclusive of venereal diseases, alcoholism, vaccinia, and injuries.			
		Admissions.		Deaths.	Noneffective.					
		Total.	Hospital.		Total.	Hospital.	Admissions.	Deaths.	Noneffective.	
January	59,198	63.52	54.62	0.47	24.72	22.86	42.74	0.29	16.59	Influenza, 323; tonsillitis, 292; acute bronchitis, 262; rhinitis, 122.
February	59,771	53.89	47.16	.54	25.26	23.31	36.66	.35	17.00	Tonsillitis, 331; acute bronchitis, 245; influenza, 161.
March	60,015	58.47	49.32	.57	24.75	22.94	39.57	.47	17.62	Tonsillitis, 271; acute bronchitis, 223; measles, 134; influenza, 108.
April	60,040	49.72	41.04	.35	23.91	22.12	31.80	.20	16.53	Tonsillitis, 197; acute bronchitis, 122; diarrhea and enteritis, 117; mumps, 99.
May	59,904	50.56	40.38	.55	22.88	20.90	30.82	.27	14.95	Diarrhea and enteritis, 199; tonsillitis, 187; acute bronchitis, 76.
June	58,476	50.43	40.29	.34	23.24	21.16	29.17	.15	14.79	Diarrhea and enteritis, 128; tonsillitis, 130; acute bronchitis, 89.
July	58,440	51.85	39.41	.33	22.69	20.41	30.08	.14	14.25	Diarrhea and enteritis, 208; tonsillitis, 99; furuncles, 94; gastritis, 91.
August	60,435	47.64	35.79	.40	21.27	19.00	27.24	.10	13.38	Diarrhea and enteritis, 290; furuncles, 87; tonsillitis, 85; acute bronchitis, 63.
September	59,697	43.92	34.71	.30	21.22	19.21	24.59	.15	13.49	Diarrhea and enteritis, 131; tonsillitis, 107.
October	59,244	52.22	41.15	.69	22.28	20.18	27.65	.17	13.44	Diarrhea and enteritis, 129; tonsillitis, 126; acute bronchitis, 118.
November	59,247	47.66	38.94	.46	22.25	20.12	25.82	.20	12.81	Tonsillitis, 152; acute bronchitis, 127; diarrhea and enteritis, 100.
December	60,832	50.12	41.51	.30	21.00	19.22	29.95	.18	12.44	Tonsillitis, 246; acute bronchitis, 180; diarrhea and enteritis, 100.
Total	59,608	619.90	504.28	4.95	22.94	20.93	376.11	2.51	14.67	Tonsillitis, 2,223; acute bronchitis, 1,651; diarrhea and enteritis, 1,608; influenza, 903.

SANITATION, UNITED STATES.

The general sanitary conditions throughout the Army for the year were very good; but few defects of importance were reported on the monthly sanitary statement, and where possible they were promptly corrected through the cooperation of the commanding officers and quartermasters. In some instances considerable appropriations of moneys were required and, therefore, these matters could not always be promptly improved.

The principal sanitary oversights that have occurred seem to have been on the Canal Zone. When troops are sent to tropical stations which have not been occupied in the immediate past, certain precautions are necessary to take to prevent the preliminary sickness always arising. The most common of these tropical diseases is malaria. The cause of it is known and the means of prevention are highly effective. A destruction of mosquito breeding is the first important measure to be undertaken, and this should not be delayed until troops are actually in occupation of the post. Military exigency may send troops into the jungle where few, if any, prophylactic measures against mosquito-borne diseases can be carried out. But in time of peace there would appear to be no excuse for sending troops to posts where preliminary drainage and jungle clearing had not already been provided for. Crude oil and larvicide should also be on hand and, if the character of the buildings permits, they should be effectively screened. In posts where permanent occupation is contemplated, buildings should always be of this character. Five months elapsed on the Canal Zone before suitable supplies of oil and larvicide were on hand to take measures against mosquito breeding at the garrison occupied by the Tenth Infantry. In an opinion called for by the War Department, this office has stated that a commanding general should be as much shocked to find barracks at tropical posts unscreened as to find the buildings in the Dakotas unprovided with doors and windows, and that quartermasters should as soon think of leaving a post in the Tropics, which was to be occupied, without oil and larvicide as to leave a post in the Dakotas for the winter months without a supply of fuel.

Our sanitary instinct in relation to life in the Tropics has not yet developed to the same point that it has in connection with living in a Temperate Zone.

The modification made in the blank form of the sanitary report now requires comment every month by the surgeon on the subject of the milk supply of the post and the character of the dairies from which it is obtained, also a statement concerning the number of new cases of venereal disease acquired by soldiers during the month. This additional data requires the post surgeon to keep closer observation of this important article of food which has been the conveyor of diseases, and also stimulates interest in reporting the character of local dairies. The statement with reference to venereal diseases during the month must necessarily keep this matter before the post

commander and the surgeon, and is a ready method of keeping this office informed of any excessive rate.

In commenting on the semimonthly physical inspection of the men as required by general orders, the department surgeon of the Eastern Department makes the following statement:

> It is believed that the semimonthly inspections of the men is absolutely futile unless it can be done without notice, as contemplated in the order above cited. It is understood that this is difficult because of the variety of duties upon which the men of an organization may be employed, it being sometimes necessary to advise company commanders 24 hours in advance in order that all the men of the organization may be present at such inspection. The suggestion contained in the order, that the inspection take place after formation would be feasible for the great majority of the men of the company if the services of the surgeon were then available. But it is believed that such inspections could be made by an instructed noncommissioned officer in the presence of and under the supervision of the organization commander. Everyone suffering from bad feet, venereal disease, or other defects could then be sent to the hospital for further examination and disposition by the surgeon. Line officers easily become familiar with such conditions when placed on recruiting duty, and if required to keep posted as to the physical condition of their men would take a more definite interest in their personal habits.

We can not entirely agree with this officer that the inspection as now carried out is futile, as it has too often been demonstrated that its institution is followed immediately by an increase in the number of venereal cases. This simply means that the cases have been discovered by the inspection. It is not contended that inspections made without warning would not be more desirable than when made as at present. However, this is difficult to do for many reasons. Should any change be necessary, it is believed the most satisfactory arrangement would be to make the physical inspection immediately after the troops had been assembled for some time, as after the return from drill and before they had been given an opportunity to enter barracks. In this way it is believed that all cases of venereal disease with acute symptoms would be observed; however, it does not appear necessary to adopt generally such a method.

The Southern Department has been, from the point of field sanitation, the most interesting geographical division during the year. This has been due largely to the unusual number of troops that have been sent to that department and which have been in camps along the border the greater part of the year between Brownsville and El Paso, Tex., and the Rio Grande, and further west into California. Speaking of the general health of the command the department surgeon of the department says:

> Despite the unusual conditions of scattered camps, some of these being in unfavorable situations and of prolonged occupancy, health conditions have been uniformly excellent. The percentage of preventable diseases has been gratifyingly small, and no epidemics of contagious affections have occurred at any point. Though the strength of the command has been greatly augmented and the number of camps increased, the percentage of its members constantly sick and the ratio of disability per thousand are not greater than in the previous year. The proportion of the command constantly sick was a little less than 2 per cent, or about 1 man in every 51. Expressing this fact in another way, we may say that in each of our depleted companies, there was an average of but 1 member on sick report throughout the year.

In this department venereal diseases caused one-third of the amount of physical inefficiency during the year. To quote this officer further:

> There are certain affections other than injuries which furnish a large amount of disability. Briefly, these are diseases of the respiratory tract, venereal disorders, and rheumatism. The cases under the second head are clearly preventable and many of the other two are likewise so. With respect to the operations of General Orders, Nos. 17 and 31, War Department, series of 1912, this office is of the opinion that the

efficiency of the measures therein prescribed depends very largely upon the degree of compulsion exercised by local commanders in carrying out the provisions of paragraph 2, General Orders 17.

No case of typhoid fever has developed in the department since its formation in February, 1913, a period of 16½ months. This fact furnished striking proof of the efficacy of antityphoid inoculation. Such serious diseases as smallpox, cerebrospinal meningitis, and diphtheria have been practically negligible. Camp diseases other than typhoid, as dysenteries and epidemic diarrheas, have been almost entirely absent.

Under the subject of "Care of the sick" he states:

The facilities for this purpose are fairly adequate. Medical officers are stationed at the 7 permanent posts and at 39 of the temporary camps, while there is at least one competent Hospital Corps man at all but one of these points. The post hospitals at Forts Sam Houston, Bliss, and Huachuca are utilized as base hospitals and medical supply depots for troops in the field. On June 30, 1914, these hospitals had 153, 85, and 36 patients, respectively, under treatment. Each regiment in the field has its normal infirmary, with such additional articles as experience has demonstrated to be desirable. Lesser stations are provided with medical supplies suited to their needs. A departmental laboratory, completely equipped for serum, bacteriological and chemical diagnosis of disease, is maintained at Fort Sam Houston, to which specimens are forwarded by medical officers at all stations. Cases not suitable for treatment in regimental infirmaries are promptly transferred to a base hospital.

Of particular interest must be the sanitary arrangement of the camp of interned Mexicans. After the battle of Ojiinaga, which occurred on January 1 and 2, 1914, the Federal refugees fled across the border and were arrested by the United States forces and marched to Fort Bliss, Tex. Later on they were sent to Fort Wingate, N. Mex. This routed force, with its camp followers, amounted to about 5,000 people. When they reached Fort Bliss typhoid fever and smallpox were already present among them. From a sanitary point of view they furnish a very interesting comparison to our own troops in the field. Following is the comment of the department surgeon:

In January about 5,000 Federal Mexican soldiers, including their female camp followers, were interned at Fort Bliss. The care of this number of people suddenly thrust on the Medical Department made a difficult situation for the department in regard to medical personnel. All the surgeons and enlisted personnel that could possibly be spared were sent for duty at the detention camp. Maj. Clarence J. Manly was designated as sanitary officer of the camp; 5 medical officers were sent to assist him; also 2 sergeants and 10 privates, Hospital Corps. Four Hospital Corps sergeants were temporarily borrowed from Fort Bayard, N. Mex. An attempt was made to use the medical personnel of the Mexican Army, but they were found to be very small in numbers and of little or no value. The sanitation of the camp conformed to the general usage of the Army. The Mexican soldiers showed great ingenuity in building adobe incinerators. The entire camp was vaccinated against smallpox and also was given the three doses of typhoid prophylactic. All this was without any serious objection on their part. No cases of typhoid fever appeared in the camp. From inquiries made of medical officers serving along the Mexican border the opinion is found that typhoid fever, while it does exist is not a very prevalent disease. Ten cases of smallpox developed. These cases were isolated, and after the vaccination was completed, no new cases appeared. It may be remarked that with the personnel available, 4,943 inoculations of the typhoid prophylactic were administered in one day.

Some sickness and a few deaths have occurred among these people at Forts Bliss and Wingate. Out of 37 deaths among the strictly military personnel, 13 (35 per cent) were from tuberculosis. The mortality for the six months during which the Mexicans have been held, has been at the rate of 21.8 per 1,000, or actually higher than the morbidity among the American troops in the department. This is due to a set of conditions among which the most prominent are: Impressment of men unwilling to serve; no preliminary tests as to physical eligibility of recruits; hard field service; bad hygienic and sanitary conditions; lack of proper medical care and attention among Mexican troops of either party; mental depression. For the great majority of these people, circumstances as to food, shelter, sanitation, and other matters which make for health, are now far better than they have ever experienced. It is reasonable to expect that, from this time forward, these favorable influences should be felt and that conditions among them should improve.

This officer further states, under the head of "Sanitation":

The practical application of our knowledge of hygienic laws is much more difficult in camps than in garrison. Moreover, the difficulties have been increased by the necessity for placing many of the border camps in or close to communities, many of whose members are entirely ignorant of, or pay no attention to, the laws of health. Among these people some of the most serious affections, such as smallpox, tuberculosis, typhoid fever, and hookworm diseases, are almost constantly present. In such primitive communities, provision for the disposal of organic wastes is lacking and conditions suited to the propagation of certain of our insect enemies (flies, lice, mosquitoes, fleas, etc.) are ideal. Over these dangerous conditions, the military authorities may exercise little or no control. It is, therefore, a matter of sincere congratulation that our defenses against epidemic disease have not broken down at any point. In effect, support is had for the statement of the late Surg. Gen. Torney, in his last annual report that "Troops properly protected * * * can live in camps properly located, with the present system of camp sanitation, for an indefinite length of time without increased morbidity."

WATER SUPPLY.

Improvements in the water supply at several posts are contemplated and will be made when public funds permit.

BARRACKS AND QUARTERS.

Some complaints of overcrowding in barracks have been made; the most important at Columbus Barracks Recruit Depot. This was the condition when an epidemic of measles broke out there this spring. In an endeavor to prevent the spread of this disease and to avoid the fatal consequences so marked there in 1911, prompt action by The Adjutant General's Office in diverting to other recruit depots applicants for enlistment, together with the measure of ordering away recruits to posts, relieved the overcrowding and permitted the effective stamping out of the threatened epidemic.

Several guardhouses have been reported as too small for the normal number of prisoners. It is believed that this point in garrisons does not receive all the attention from commanding officers and medical officers that it should. Epidemic diseases have frequently originated in guardhouses that apparently were overcrowded or insanitary. It is dangerous to have in a garrison such a focus of disease, and prison rooms should certainly have sufficient cubic capacity per-capita to prevent their becoming a center and distributing point of infectious diseases. Most of them particularly need sufficient bathing facilities and places for washing and drying clothing.

Two isolation hospitals that were appropriated for were not constructed. The newer ideas in relation to the subject of isolation and disinfection render them unnecessary.

It is believed that economy can be effected in the more conservative use of disinfectants, especially in their application to terminal disinfection. The excessive amount of terminal disinfection expected by the public does not seem to be warranted by the facts, and the more advanced opinion in the profession indicates that much of the terminal disinfection is superfluous.

SMOKE NUISANCE.

Complaints have been made this year concerning the smoke nuisance at Forts Leavenworth, Sheridan, Wayne, and Columbus Barracks. Some improvement seems to be promised at all of these posts, but it is a point to note in future selections of sites for garrisons.

CLOTHING.

Numerous complaints have been registered concerning the service cap, which does not protect the head and eyes in hot weather, and has been found inefficient as an article of headdress in wet weather.

Some complaint has also been made against the campaign hat for the hot season in the Tropics, it is not considered an ideal article of headdress under such circumstances, though it is preferred under all circumstances to the service cap. The latter article is not prescribed for use under field-service conditions and, if it is not efficient then, it is not seen how it can be at any other time. The soldier's head and eyes need as much protection when in the sun at drill as when he is actually in the field.

The present type of army shoe is believed to be the most satisfactory that the Army has ever had, and the approval with which it meets supports the action of the board for the selection of the proper shoe for the Army, of which Maj. Edward L. Munson, Med. Corps, was president.

REGULAR PHYSICAL EXAMINATION.

The prescribed physical examination of soldiers made twice a month gives opportunity to detect cases of poor physical development. In most posts there are gymnasiums well equipped with the necessary apparatus, where soldiers may, under proper direction, correct and improve muscular defects. It is believed that sufficient attention has not been paid to this part of the post surgeon's duties. With the cooperation of the company officers, much may be done to improve both the appearance and the health of the young soldiers through proper physical exercises.

SANITATION, SECOND DIVISION.

CAMPS AT TEXAS CITY AND GALVESTON.

These camps, which were established on February 27, 1913, continued to be occupied throughout the year. A portion of the Second Division is still in the camp at Texas City, Tex. The troops in the neighborhood of Fort Crockett, Tex., formed a greater part of the expeditionary forces which were sent to Mexico in May, 1914. A full description was given of these camps by Col. Jefferson R. Kean, Medical Corps, in the annual report of this office for 1913. No material change took place in either of these camps during the year 1913, with the exception of a water-carriage sewage system, which was established in the camp at Texas City. This was an extension of the Texas City system, and by crude but sanitary connections, the greater portion of the camp was enabled to dispose of the human wastes by water-carriage system. It is important to note that no case of typhoid fever has developed in these camps during the year 1913, nor, indeed, at the date of writing (Sept. 1, 1914). The health conditions, generally speaking, have been entirely satisfactory, as the following figures show:

Second Division, year 1913.

Rates.	Second Division.	Army in United States.
Admissions (all)	500.57	619.90
Noneffective (all)	12.97	22.94
Admissions for malaria	6.86	8.78
Admissions for venereal diseases	91.19	85.83
Admissions for tuberculosis (all)	2.18	3.07

Lieut. Col. William B. Banister, Medical Corps, has been the division surgeon from the establishment of the camp; Maj. Reuben B. Miller, Medical Corps, the sanitary inspector at Texas City, Tex., until relieved in August, 1913, by Maj. James M. Phalen, Medical Corps; Maj. Frederick M. Hartsock, Medical Corps, sanitary inspector at the Galveston camp. As the result of Col. Banister's experience at this camp considerable modification has been introduced in the blank forms provided for the office of a division surgeon. It is reported that these modified blank forms answer all purposes for which they were devised most satisfactorily. The sanitary measures which have become customary in our service have been in force at these camps with most satisfactory results.

OTHER CAMPS ON THE SOUTHERN BORDER.

During the trouble in Mexico the border patrols and border garrisons have been largely augmented. These necessitated the reoccupation of some of the abandoned posts and the establishment of

camps in the neighborhood of others, and of small camps at many remote points. The sanitary reports from these places indicate a continuance of the excellent health conditions that prevail at the larger camps at Galveston and Texas City, Tex. The same sanitary measures were employed.

CAVALRY CAMP OF INSTRUCTION, WINCHESTER, VA., 1913.

The Eleventh, Tenth, and part of the Fifth Cavalry Regiments were in camp at Winchester, Va., from July 24, to September 25, 1913.

Maj. James S. Wilson, Medical Corps, was camp surgeon; Maj. C. C. Collins, Medical Corps, sanitary inspector. A provisional field hospital under the command of Maj. T. L. Rhoads, Medical Corps, was used as a receiving hospital, and such cases as required an extended treatment were sent to the Walter Reed General Hospital, Takoma Park, D. C. Six cases too seriously ill to travel were sent to a local hospital and were there attended by an Army surgeon. All of these cases were operative ones.

It is worthy of note that no typhoid occurred among the troops in camp, nor later at their permanent stations, though an epidemic of typhoid (milk borne) existed throughout the period of the camp in the neighboring town of Winchester, which the soldiers visited.

A course of instruction for the sanitary troops was carried out.

The camp surgeon reports as follows:

CAMP SANITATION.

Camp site 5 miles from Winchester, Va., was satisfactory. Altitude of camp estimated at about 700 feet above the sea level.

Regiments camped on two "hog backs," separated by a ravine, about 50 feet deep with a steep slope. No overcrowding of tentage. Many of the tents of the Tenth Cavalry were more or less unserviceable.

Soil, sandy loam, over a stratum of slate very near surface.

Drainage, "natural" and excellent.

WATER SUPPLY.

Fairly abundant and of good quality. On first examination the water showed colon bacilli in reports from the laboratory, Army Medical School. Later was pronounced potable by laboratory, Army Medical School.

Many cases of diarrhea occurred immediately after arrival in camp believed due to "change of water," as the water supply was very "hard" and contained some sulphur.

The source of the water was from seven wells varying in depth from 60 to 130 feet, and stored in two large tanks from which it was distributed by pipes to the camps of the various organizations.

SUBSISTENCE.

The food was of excellent quality, abundant, and well prepared. No food was sold in camp without permission of the camp commander and inspection by a medical officer.

WASTES.

Pit system for latrines was used. It was satisfactory. Garbage was incinerated at kitchens.

SUMMARY.

Camp police was excellent.

Flies.—The camp was relatively free from flies owing to care taken to eliminate suitable sites for their breeding.

Health of the command.—Has been excellent. Practically all cases, except those of diarrhea occurring immediately after arrival in camp, incident to the active life led by the officers and men.

No infectious diseases admitted to hospital except 3 cases of pulmonary tuberculosis, transferred. There were but 42 cases of venereal disease reported.

The prescribed physical inspections, in compliance with General Orders 17, War Department, 1912, were held.

The routine use of lime around kitchen sinks and incinerators was not authorized.

Sick report.—The average admission rate throughout the camp was 14.68 per 1,000. Subsequent to the temporary diarrhea already referred to, the admission rate was 6.81 per 1,000.

RECOMMENDATIONS.

That the routine use of lime be forbidden in the field as it is in the post (Par. 1509, A. R.).

The adoption by a board of officers of the Medical and Quartermaster Corps of a type of latrine and bathhouse suitable for concentration camps.

An extract from the report of the officer in command of the provisional field hospital follows:

There were 168 admissions to the hospital during its existence from July 24 to September 25, 1913, from the following causes:

Fractures	18
Venereal diseases	18
Appendicitis	5
Gastroenteritis	19
Tonsillitis	3
Bronchitis	4
Tuberculosis	3
Wounds	30
Other causes	68
Total	168

Pit latrines were used in connection with the hospital, the pits being covered with standard latrine boxes, from specifications of the Quartermaster Department, and were surrounded by a substantial shelter and roof built of wooden framework and tar-paper roofing. In conserving the health of a command in camp it is essential that latrines be roofed, especially those used in connection with the hospital. Among those well and nearly well in camp, uncovered latrines on rainy days will be responsible for constipation and attendant ills, and the uncovered latrine on such days will be a cause of much distress to weak or diarrheic patients. A satisfactory model for latrine shelter in camps, with vents at the eaves, was built by the Hospital Corps detachment at this hospital. Separate latrines were built for officers, Hospital Corps detachment, and patients.

Maj. Collins, sanitary inspector, inspected the site of the camp with a representative of the Quartermaster Department on June 8. He reports in part as follows:

The Quartermaster Department completed the preparations for the camp about July 15. The water system, latrines, screened kitchens, and central incinerator were also completed before the first troops arrived on July 18.

WATER SUPPLY.

From batteries of deep driven wells, pumped into two tanks by gasoline engines and distributed to kitchens and baths through pipes laid 18 inches under the surface of the ground. This water was examined at the laboratory, Army Medical School, prior to commencement of the camp and pronounced unfit for drinking purposes on account of the presence of colon bacilli, probably due to surface infection from animal droppings, as the land adjacent to the wells had been used as pasture land for cattle. Two Darnall chlorine apparatuses were installed, one at each tank, and the water examined after treatment with chlorine was pronounced entirely free from colon bacilli. Raw water from both tanks was examined at frequent intervals and about 10 days after commencement of the camp was found potable and the sterilization discontinued. There have been no water-borne diseases during the camp. In this connection, however, it is believed that a diarrhea prevalent at the beginning of the camp was due to the excessive hardness and free sulphur in the water.

BATHS.

Bathhouses were constructed of rubberoid roofing nailed to frames of 2 by 4's. One bathhouse containing four showers was supplied for each squadron. This number of showers proved sufficient.

MILK.

The whole milk supply of the camp has been obtained from one modern dairy, 1½ miles from the camp, which was inspected at intervals by the sanitary inspector. The cows had received the tuberculosis test, and the sanitary conditions surrounding the establishment were satisfactory.

ALASKA.

The mean enlisted strength of the troops serving in Alaska during the past year was 1,141, as compared with 1,197 in 1912. This force consisted of Infantry, Signal Corps, and Hospital Corps, all white. Alaska still remains the healthiest region in which the Army is stationed. The noneffective, admission, and death rates were all lower in 1913 than in 1912. The discharge rate was somewhat higher.

The admission rate for all causes was 495.18 per 1,000 in 1913, as compared with 511.28 in 1912. The rate for disease was 354.08 per 1,000, and that for external causes 141.10. The corresponding rates for the United States were, for total causes 619.90 per 1,000, that for disease being 487.94, and that for external causes 131.96. The diseases having the highest admission rates were: Venereal diseases, 25.42; alcoholism, 21.91; diseases of the pharynx, 28.05; and bronchitis, 27.17 per 1,000. The rate for discharge on certificates of disability in 1913 was 9.64, and in 1912, 5.01.

Admission rates for some of the principal diseases for Alaska, American troops (enlisted men).

Disease.	1913	1912
Influenza	36.81	5.85
Bronchitis	27.17	14.20
Venereal diseases	25.42	41.77
Muscular rheumatism	22.79	25 06
Alcoholism (all)	21.91	30.07
Gastritis, acute and chronic	21.03	15.03
Tonsillitis	16.65	20.05
Diarrhea and enteritis	11.39	10.86
Appendicitis	11.39	6.68
Rheumatism, articular (all)	10.51	6 68
Mental alienation	5.26	6.68
Constipation	2.63	10.02
Mumps	1.75	6.68
Synovitis	1.75	3.34
Malarial fevers	1.75	5.01
Tuberculosis (all)	1.75	4.18
Measles	.....	21.72

The noneffective rate was 13.62 per 1,000 in 1913, as compared with 16.24 in 1912. The rate for disease was 9.13, and for external causes 4.49 per 1,000. The diseases causing the highest noneffective rates were: Venereal diseases, 0.76; mental alienation, 0.95; appendicitis, 0.84, and influenza 0.42 per 1,000.

Noneffective rates for some of the principal diseases for Alaska, American troops (enlisted men).

Disease.	1913	1912
Mental alienation	0.95	0.27
Appendicitis	.84	.34
Venereal diseases	.76	2.59
Rheumatism, articular (all)	.54	.18
Tuberculosis (all)	.53	.38
Bronchitis	.47	.28
Influenza	.42	.09
Muscular rheumatism	.35	.51
Gastritis, acute and chronic	.26	.18
Tonsillitis	.23	.26
Alcoholism (all)	.15	.57
Diarrhea and enteritis	.09	.12
Mumps	.09	.38
Malarial fevers	.03	.10
Constipation	.02	.08
Measles	.....	1.07

The death rate in 1913 was 4.38 per 1,000, and in 1912 it was 5.85. In actual numbers, 2 deaths occurred from disease and 3 from external causes.

Tables Nos. 3 and 73, pages 32 and 254, give all figures for troops in Alaska for the year 1913.

TABLE NO. 43.—*Influence of station, year 1913, Alaska, on officers and enlisted men.*

	Mean strength.	Ratios per 1,000 of mean strength.												Average number of days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective from sickness.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
										From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.					
		From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
Fort William H. Seward	360	533.33	377.78	5.87	5.87	11.11	8.33	16.98	14.20	15.87	14.31	10.09	9.54	5.79	10.86	3.68	9.75
Fort Gibbon	297	562.29	350.17	21.13	17.61	.....	.....	21.13	17.61	11.27	9.73	8.69	7.79	4.11	7.32	3.17	9.06
Fort Liscum	191	324.61	183.25	5.59	5.59	5.24	.....	10.83	5.59	9.75	9.38	4.40	4.13	3.56	10.97	1.61	8.77
Fort St. Michael	148	331.08	216.22	14.18	14.18	.....	.....	14.18	14.18	16.33	15.94	10.96	10.57	5.96	18.00	4.00	18.50
Fort Davis	147	721.09	353.74	.....	.....	6.80	.....	6.80	.....	16.68	12.10	5.87	4.72	6.09	8.44	2.14	6.06
Fort Fairbanks	58	137.93	103.45	.....	.....	.....	.....	.....	.....	1.94	1.65	1.56	1.37	.71	5.12	.57	5.50
Total officers and enlisted men	1,201	486.26	303.91	9.64	8.76	5.00	2.50	14.64	11.26	13.24	11.71	8.02	7.39	4.83	9.94	2.93	9.63
Total enlisted men	1,141	495.18	306.75	9.64	8.76	4.38	1.75	14.02	10.51	13.62	12.24	8.22	7.70	4.97	10.04	3.00	9.78

PHILIPPINE ISLANDS.

AMERICAN TROOPS.

A marked improvement in the health of the American troops stationed in the Philippines is shown for the year 1913, as compared with 1912. The excessive rates for malarial and venereal diseases have been markedly reduced. This is apparently partly due to less field service and maneuvers, and to renewed efforts on the part of line and medical officers to reduce the frequency of these preventable diseases. As noted in last year's report, the high malarial and venereal rates were the occasion of special investigation and renewed efforts for their reduction. It is, therefore, satisfactory to report an improvement in response to these efforts for the year 1913.

The mean strength of the American troops stationed in the Philippine Islands for the year was 11,188 (S. G. O.). Of this number 9,377 were white, and 1,811 were colored. In addition there were the Philippine Scouts with a mean strength of 5,096 (S. G. O.), for whom the medical statistics will be given separately on page 107.

CONSTANTLY NONEFFECTIVE RATES.

The total constantly noneffective rate for the year was 30.91; that for the white troops being 31.35, and for the colored 28.63.

The total noneffective rate for disease in 1913 was 26.84 per 1,000, as compared with the corresponding rate of 39.85 for 1912, and 37.83 for 1911.

ADMISSION RATES.

As stated on page 14 in the tabulation for 1913, the readmissions for what is obviously the same attack of the same disease have been omitted. During the year there were 10,316 case admissions for all causes, white and colored troops, and with a mean strength of 11,188, making a case admission rate of 922.06, as compared with the corresponding rate of 1,246.99 for 1912, 1,132 for 1911, and 1,144 for 1910. The case admission rate for disease was 776.28 for 1913, 1,075.34 for 1912, 947 for 1911, and 956 for 1910. The case admission rates for white troops for diseases, injuries, and all causes were 784.47, 151.22, and 935.69 per 1,000, as compared with the corresponding rates for colored troops, which were, respectively, 733.85, 117.61 and 851.46 per 1,000.

The case admission rate for injuries was 145.78, as compared with 171.64 for 1912, 185 for 1911, and 188 for 1910. It is thus apparent that the admission rate for injuries was lower in 1913 than it has been for several years previous.

DISCHARGE ON CERTIFICATES OF DISABILITY.

The American soldiers are very rarely discharged in the Philippines, the cases being invalided home and discharged in the United States, but these are, however, credited to the Philippines. These are the cases shown in the Table No. 28.

Military Districts, Philippine Islands, showing the relative Admission, Discharge, and Death rates for Disease, American Troops, {enlisted men} year, 1913.

District of Luzon:		District of Mindanao:	
Admissions	692.86	Admissions.	1041.67
Discharges.	12.61	Discharges.	19.51
Deaths.	1.96	Deaths.	1.58

The discharge rate for 1913 was 14.14, as compared with the corresponding rate of 9.63 per 1,000 for 1912. The rate for disease was 13.44 per 1,000 and that for injury 0.70, as compared with the corresponding rates of 8.34 and 1.29 in 1912. The total rate for the white troops was 14 and that for colored troops was 14.91.

The diseases causing the highest number of discharges were:

Disease.	Absolute numbers.	Rate per 1,000.
Mental alienation	41	3.60
Tuberculosis (all)	45	3.95
Venereal diseases	24	2.11

The corresponding rate for mental alienation in the United States was 2.24 per 1,000, being lower than the rate in the Philippines.

TABLE No. 28.—*Discharges for disability, American troops in the Philippine Islands, year 1913.*

Cause of discharge.	Number discharged.	Percentage of discharges for disability for disease.	Discharged for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty.
DISEASES.							
General diseases	81	52.94	45	9	27	.....	1
Tuberculosis	45	29.41	39	6	.....	.....	1
Of the lungs	42	27.45	37	5	.....	.....	1
Of other organs	2	1.31	2	.....	.....	.....	.....
Of the vertebra	1	.65	.....	1	.....	.....	.....
Venereal diseases	24	15.69	1	2	21	.....	.....
Gonorrhea	17	11.11	1	1	15	.....	.....
Arthritis	12	7.84	.....	.....	12	.....	.....
Urethritis, chronic	4	2.61	.....	1	3	.....	.....
Disease of the eye	1	.65	1	.....	.....	.....	.....
Syphilis (all tertiary)	6	3.92	.....	1	5	.....	.....
Chancroid	1	.65	.....	.....	1	.....	.....
Alcoholism (all chronic)	5	3.27	.....	.....	5	.....	.....
Articular rheumatism	2	1.31	1	1	.....	.....	.....
Chronic	1	.65	.....	1	.....	.....	.....
Arthritis deformans	1	.65	1	.....	.....	.....	.....
Entamebic dysentery	1	.65	1	.....	.....	.....	.....
Benign tumor	1	.65	1	.....	.....	.....	.....
Exophthalmic goiter	1	.65	1	.....	.....	.....	.....
Diabetes mellitus	1	.65	1	.....	.....	.....	.....
Drug habit (cocaine)	1	.65	.....	.....	1	.....	.....
Diseases of the nervous system and organs of special sense	59	38.56	13	44	2	.....	.....
Mental alienation	41	26.80	7	32	2	.....	.....
Dementia precox	27	17.65	4	23	.....	.....	.....
Defective mental development	7	4.58	.....	7	.....	.....	.....
General paralysis	3	1.96	1	.....	2	.....	.....
Paranoid state	2	1.31	2	.....	.....	.....	.....
Psychosis, manic depressive	1	.65	.....	1	.....	.....	.....
Psychosis of degeneracy	1	.65	.....	1	.....	.....	.....
Epilepsy	5	3.27	.....	5	.....	.....	.....
Neuralgia and neuritis	5	3.27	3	2	.....	.....	.....
Neuritis, chronic	2	1.31	2	.....	.....	.....	.....
Hysteria, major	2	1.31	.....	2	.....	.....	.....
Neuralgia, chronic	1	.65	1	.....	.....	.....	.....
Other diseases of the nervous system	5	3.27	2	3	.....	.....	.....
Neurasthenia, chronic	2	1.31	2	.....	.....	.....	.....
Neurosis, traumatic	2	1.31	.....	2	.....	.....	.....
Paramyoclonus, multiplex	1	.65	.....	1	.....	.....	.....
Locomotor ataxia	1	.65	.....	1	.....	.....	.....
Myelitis, chronic	1	.65	1	.....	.....	.....	.....
Otitis media, chronic	1	.65	.....	1	.....	.....	.....

TABLE No. 28.—*Discharges for disability, American troops in the Philippine Islands, year 1913*—Continued.

Cause of discharge.	Number discharged.	Percentage of discharges for disability for disease.	Discharged for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty.
Diseases of the bones and organs of locomotion.	4	2.61	3	1	.....	.....	.....
Arthritis, chronic	2	1.31	2	.....	.....	.....	.....
Flatfoot	2	1.31	1	1	.....	.....	.....
Diseases of the circulatory system	2	1.31	1	1	.....	.....	.....
Hemiplegia	1	.65	1	.....	.....	.....	.....
Varicocele	1	.65	.....	1	.....	.....	.....
Diseases of the respiratory system	2	1.31	.....	2	.....	.....	.....
Bronchiectasis	1	.65	.....	1	.....	.....	.....
Asthma, bronchial	1	.65	.....	1	.....	.....	.....
Diseases of the digestive system	2	1.31	2	.....	.....	.....	.....
Hernia, inguinal	1	.65	1	.....	.....	.....	.....
Enteroptosis	1	.65	1	.....	.....	.....	.....
Diseases of the genito-urinary system	2	1.31	.....	2	.....	.....	.....
Enuresis, chronic	2	1.31	.....	2	.....	.....	.....
Diseases of the skin and cellular system	1	.65	.....	1	.....	.....	.....
Corns	1	.65	.....	1	.....	.....	.....
Total	153	100.00	64	60	29	.....	1
EXTERNAL CAUSES.							
Fractures	3	37.50	3	.....	.....	.....	.....
Gunshot wound	1	12.50	1	.....	.....	.....	.....
Dislocation	1	12.50	1	.....	.....	.....	.....
Sprain	1	12.50	1	.....	.....	.....	.....
Contusion, weakness of knee following	1	12.50	.....	.....	1	.....	.....
Result of injury received prior to enlistment.	1	12.50	.....	1	.....	.....	.....
Total	8	100.00	6	1	1	.....	.....
Total for diseases	153	95.03	64	60	29	.....	1
Total for external causes	8	4.97	6	1	1	.....	.....
Grand total	161	100.00	70	61	30	.....	1

DEATHS.

Deaths occurring in the United States in persons invalided home from the Philippine Islands are credited to the Philippines. There were 59 deaths in 1913, 30 from disease and 29 from external causes, the total rate being 4.87 per 1,000, that for disease 2.48, and for injuries 2.39. These figures are taken from Table No. 29 and are for officers and enlisted men. The figures are slightly different from those given in Table No. 72 in the back of the report, which are for enlisted men only and show only 53 deaths. The corresponding rates for 1912, officers and enlisted men, were: Total, 5.26 per 1,000; diseases, 2.82, and injuries, 2.44 per 1,000. There were 2 deaths from drowning in 1913, and 13 in 1912; 3 from suicide in 1913, and 3 in 1912; 2 from homicides in 1913, and 4 in 1912. There were 3 officers and 3 enlisted men, American troops, killed in action in 1913.

Tuberculosis caused 9 deaths in 1913, and 7 in 1912; malaria, 2 deaths in 1913, and 4 in 1912; dysentery, 6 in 1913, and 1 in 1912; organic disease of the heart, 2 in 1913, and 1 in 1912.

TABLE NO. 29.—*Causes of death, American troops, Philippine Islands, year 1913—Officers and enlisted men.*

Cause of death.	Number of deaths.	Ratio per 1,000 of—	
		Mean strength.	Deaths from disease.
DISEASES.			
Tuberculosis	9	0.74	300.00
Of the lungs	6	.50	200.00
Miliary	2	.17	66.67
Meningitis, tuberculous	1	.08	33.33
Dysentery, entamebic	6	.50	200.00
Malarial fever, estivo-autumnal	2	.17	66.67
Cardiac dilatation	2	.17	66.67
Pneumonia, lobar	2	.17	66.67
Abscess of the liver	2	.17	66.67
Cholera, Asiatic	1	.08	33.33
Purulent infection	1	.08	33.33
Aneurism of the aorta	1	.08	33.33
Embolism, cerebral	1	.08	33.33
Peritonitis, general septic	1	.08	33.33
Nephritis, parenchymatous, chronic	1	.08	33.33
Arterial sclerosis	1	.08	33.33
Total	30	2.48	1,000.00
EXTERNAL CAUSES.			
Suicides	3	.25	103.45
By firearms (all service rifles)	3	.25	103.45
Homicides	2	.17	68.97
By firearms—revolver—shot by comrade	1	.08	34.48
By cutting instrument—stab wound by civilian	1	.08	34.48
Accidents	24	1.98	827.59
By crushing (wreck of an electric car on which company was going to drill ground, 8; trying to board a moving train, 1)	9	.74	310.34
Wounds in action	6	.50	206.90
By gunshot	5	.41	172.41
By barong	1	.08	34.48
Drowning (fell from bridge, 1; fall from lorcha, 1; found drowned, 1)	3	.25	103.45
By burns (fell into pile of burning refuse)	1	.08	34.48
Diving into shallow water	1	.08	34.48
Hit by a cable	1	.08	34.48
Hit by falling aeroplane	1	.08	34.48
Heat prostration	1	.08	34.48
Found dead	1	.08	34.48
Total	29	2.39	1,000.00
Total for diseases	30	2.48	508.47
Total for external causes	29	2.39	491.52
Grand total	59	4.87	1,000.00

PREVALENCE OF SPECIAL DISEASES, AMERICAN TROOPS (ENLISTED MEN).

TYPHOID FEVER.

The admission rate per 1,000 was 0.40 in 1912, 0.88 in 1911, and 2.53 in 1910. The rate for the American Army as a whole was 0.05.

Table No. 30.—No cases of typhoid fever in the Philippines.

MALARIAL FEVERS.

The admission rate for all fevers of this class was 112.08, as compared with 171.00 for 1912, 75.56 for 1911, 86.34 for 1910, 112.35 for 1909, 123.97 for 1908, 167.79 for 1907. Malarial fevers stand second among causes of admission for disease for American troops.

Chart W.

Chart X.

The post having the highest admission rate was Augur Barracks, with a rate of 514.9; Ludlow Barracks was second with a rate of 399.04. The latter post had the highest rate for 1912, which was 550.

TABLE NO. 31.—*Malarial fevers, year 1913, compared with 1912, for posts in the Philippine Islands in which the commands are composed principally of American troops—Officers and enlisted men.*

Posts.	Ratios per 1,000 of mean strength.	
	1913	1912
Augur Barracks, Mindanao	514.90	459.39
Ludlow Barracks, Mindanao	399.04	550.00
Camp Overton, Mindanao	322.03	335.71
Pettit Barracks, Mindanao	309.68	338.58
Camp Eldridge, Luzon	143.15	145.65
Camp Keithley, Mindanao	123.89	198.76
Camp Stotsenburg, Luzon	120.99	259.74
Cuartel de Espana, Luzon	96.89	22.97
Fort William McKinley, Luzon	68.23	104.71
Fort Mills, Luzon	44.18	45.37
Camp John Hay, Luzon	34.48	9.35
Santiago and headquarters, Manila, Luzon	29.41	10.58
Camp McGrath, Luzon	19.05	50.36
Fort Wint, Luzon	10.10	194.33

UNDETERMINED FEVERS.

The admission rate for these fevers was 5.27 per 1,000, as compared with 15.46 for 1912, 6.74 for 1911, and 10.75 for 1910. The various diagnoses under this head are as follows:

Febricula	9
Fevers, simple, continued	4
Fever, type undetermined	46
Total	59

SMALLPOX.

None occurred.

VENEREAL DISEASES.

Venereal diseases still hold first place for both admission and noneffective rate. About one-sixth of the total number of admissions for disease were due to venereal diseases. There were 975 admissions for gonorrhea, 326 for chancroid, and 371 for syphilis. The total admissions for the year were less than the admissions for gonorrhea alone in 1912. About one-third of the total noneffective rate for disease was due to venereal diseases.

Venereal diseases, Philippine Islands.

	Syphilis.	Chancroid.	Gonorrhea.	Total.
White troops:				
1913	32.31	24.74	83.71	140.77
1912	45.07	56.06	114.30	215.43
Colored troops:				
1913	37.55	51.90	104.92	194.37
1912	23.69	159.14	341.23	524.06
All American troops:				
1913	33.16	20.14	87.14	149.45
1912	42.73	67.33	139.11	249.17

TABLE 32.—*Venereal diseases at posts in the Philippines having strength of more than 300 men (principally American troops), year 1913—Officers and enlisted men.*

Posts.	Admissions.		Mean. strength.
	Total.	Ratios.	
Camp McGrath	201	273.47	735
Fort William McKinley	575	210.93	2,726
Camp Eldridge	82	165.32	496
Cuartel de Espana	84	145.33	578
Santiago and headquarters, Manila	51	136.36	374
Camp Stotsenburg	172	125.36	1,372
Augur Barracks	56	66.75	839
Fort Mills	143	63.81	2,241
Ludlow Barracks	23	55.29	416
Camp Keithley	36	39.82	904
Camp Connell[1]	12	32.70	367
Pettit Barracks	10	21.51	465
San Fernando, Vigan, Batac, and Laoag[1]	3	9.29	323

[1] At Camp Connell and San Fernando, Vigan, Batac, and Laoag the commands were composed almost entirely of Philippine Scouts.

ALCOHOLISM AND ITS RESULTS.

The admission rate, 20.38, was lower than 21.20 for 1912. The noneffective rate was 0.34 in 1913, and 0.35 in 1912 per 1,000. In 1913 the rates for white troops were 22.29 and 0.34. Those for colored troops were 10.49 and 0.38.

CHOLERA.

One fatal case of this disease occurred during the year in the person of a white soldier.

TUBERCULOSIS.

There were 75 cases among the American troops, a ratio of 6.70 per 1,000. These cases were all promptly transferred home, and no deaths occurred there from the disease. Of the 9 deaths reported, 6 occurred in cases transferred to the United States. In 1912 there were 62 cases, with a ratio of 5.02, and in 1911, 47 cases, with a ratio of 3.77 per 1,000.

BERIBERI.

No case of this disease occurred among the American troops.

DYSENTERY.

The occurrence of this disease is still more frequent than in 1910, being 20.83 per 1,000, as compared with 16.91 in 1912, 14.37 in 1911, 19.39 in 1910, and 43.03 in 1909. There were 189 cases of entamebic dysentery with a rate of 16.89, 9 cases of bacillic with a rate of 0.80, and 35 unclassified with a rate of 3.13 per 1,000. The noneffective rate for all dysentery was 1.24 per 1,000 for 1913, and 1.12 for 1912.

DENGUE.

This disease had the third highest admission and noneffective rate. There were 439 cases with an admission rate of 39.24 per 1,000, and a noneffective rate of 0.56, as compared with 1,346 admissions in 1912, with an admission rate of 108.93 and a noneffective rate of 1.90. There was no death or discharge for disability resulting.

MENTAL ALIENATION.

The admission rate for mental alienation was 4.83 for American troops in the Philippine Islands. In the United States the rate was 2.92. Last year the rates were 3.56 for American troops in the Philippine Islands, and 3.26 in the United States.

DIARRHEA AND ENTERITIS.

The admission rate for these diseases shows quite a large increase over 1912, being 67.48 per 1,000, as compared with 60.69 for 1912, 46.09 for 1911, and 74.86 for 1910. The noneffective rate was 1.14 per 1,000 in 1913, as compared with 1.05 in 1912, 0.92 in 1911, and 1.38 in 1910.

INVALIDING TO THE UNITED STATES.

The diseases causing the highest number of men to be invalided home were, with actual numbers: Tuberculosis, 77; mental alienation, 53; gonorrhea, 15; neurasthenia, 7; epilepsy and chronic alcoholism, 8.

Chart W.

Admission, Discharge, Death and Noneffective rates for Special Diseases, Philippine Islands, American Troops {enlisted men} year, 1913.

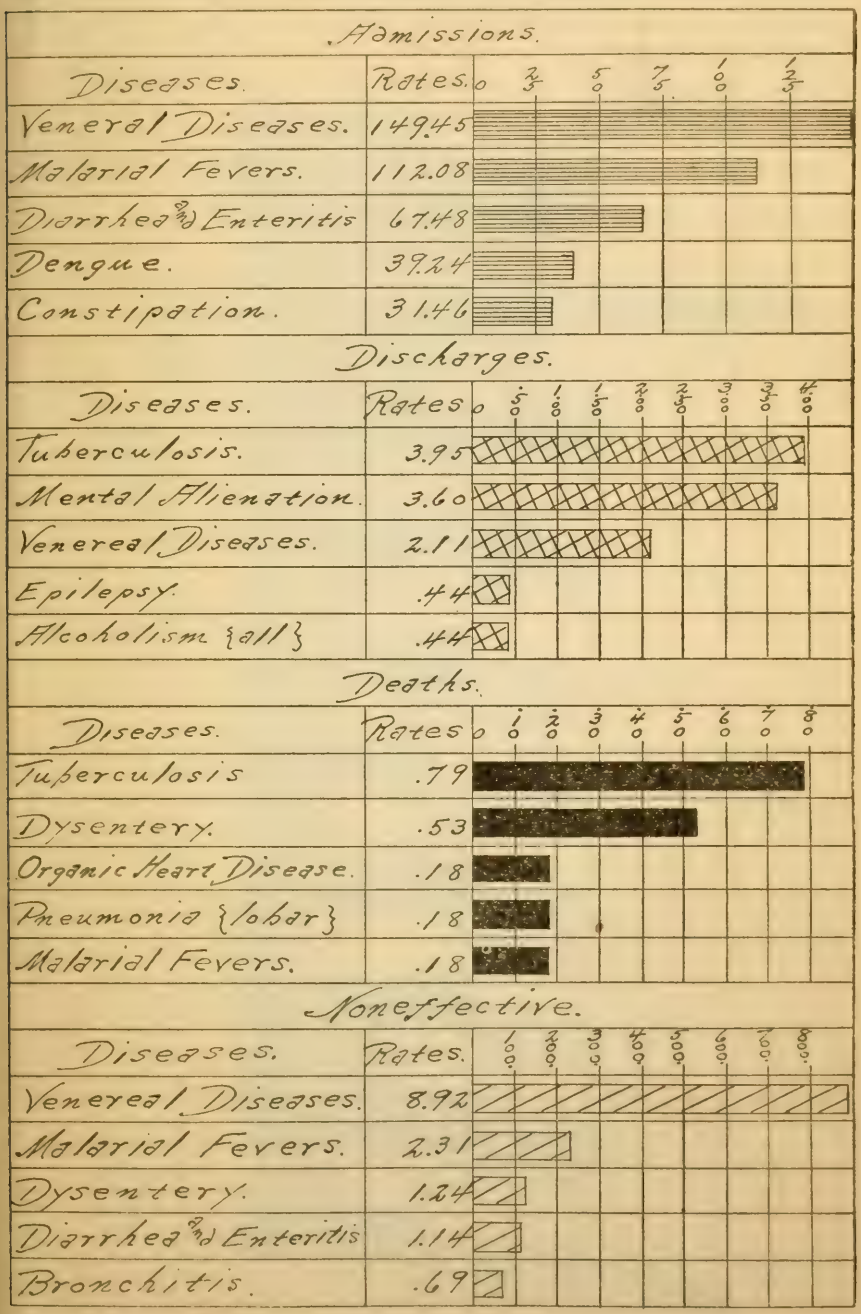


Chart X.

Malarial Fevers.

Admission Rates.

Admission rates for Malarial Fevers for the Philippine Islands, American Troops {enlisted men} years, 1904–1913.

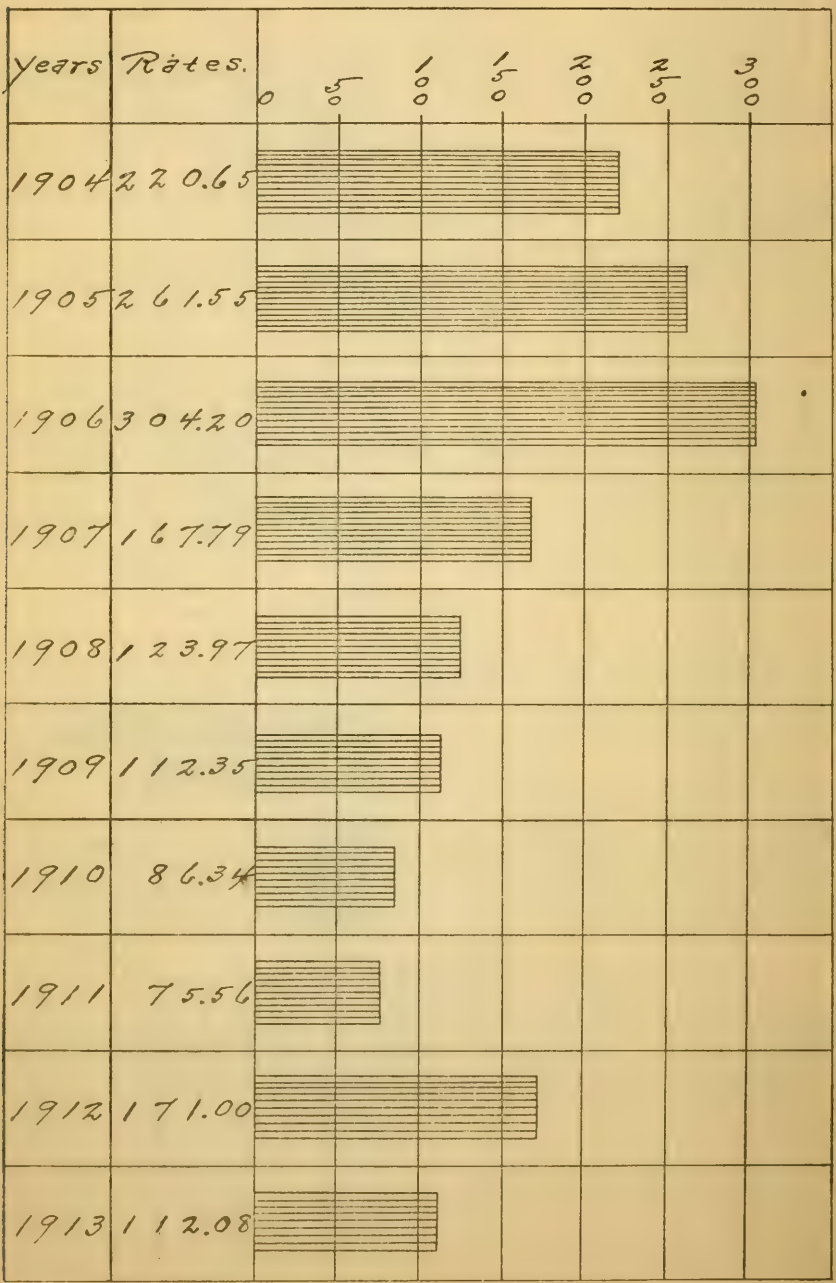


Chart Y.

Malarial Fevers.

Admission Rates.

Comparison of Admission rates, Malarial fevers, American troops {enlisted men} and Philippine Scouts, Philippine Islands, years, 1904–1913.

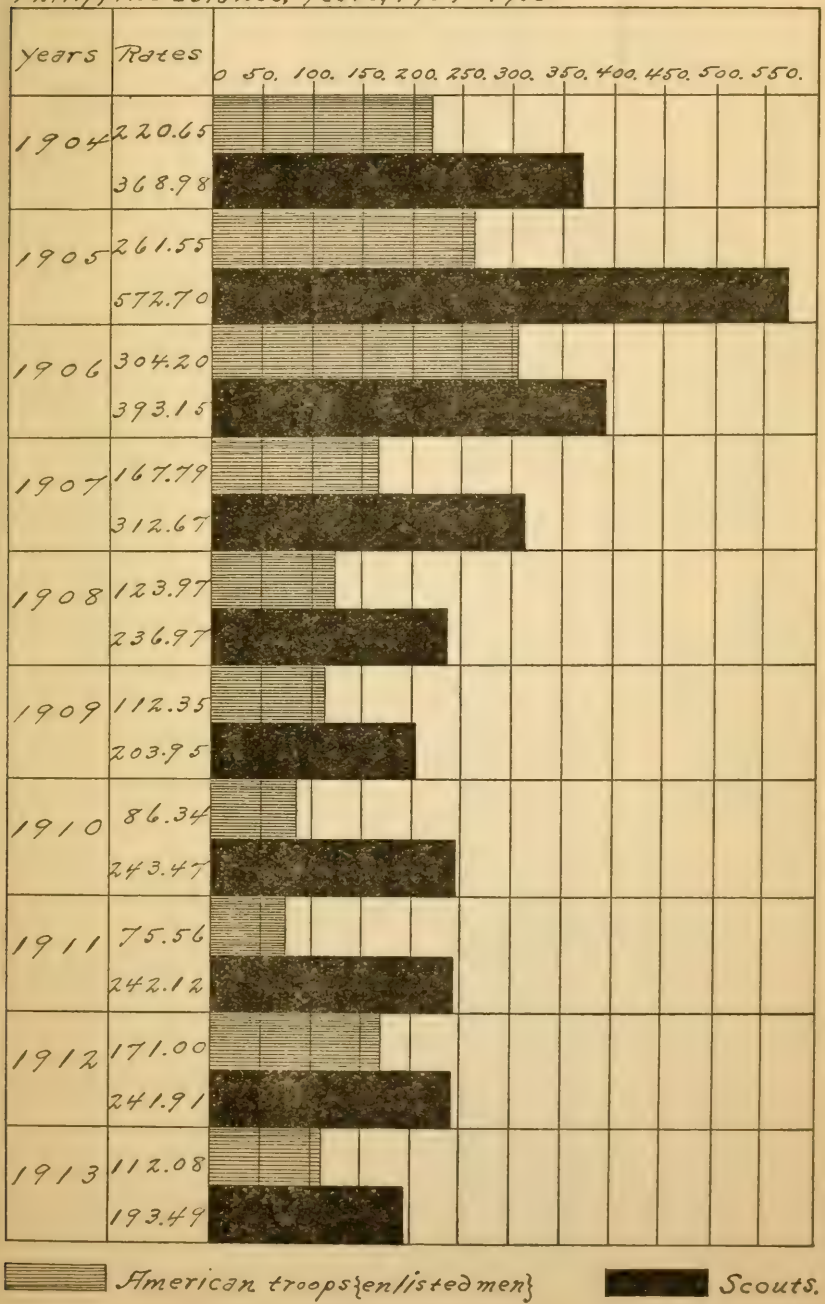


TABLE NO. 33.—*Enlisted men invalided home from the Philippine Islands, year 1913.*

Causes.	Number of cases.	Per centage of total cases.	Duty.	Discharged on certificate of disability.	Died.	Otherwise disposed of.	Remaining at end year.
Tuberculosis (pulmonary, 74; of other organs, 3)	77	30.56	11	29	5	5	27
General paralysis of the insane, and other forms of mental alienation	53	21.03	1	38			14
Gonorrhea	15	5.95	1	13			1
Syphilis	10	3.97	1	4			5
Chronic alcoholism	8	3.17	2	4		1	1
Epilepsy	8	3.17	1	5		1	1
Neurasthenia	7	2.78	2	2			3
Fracture, exclusive of gunshot	5	1.98		3		2	
Nephritis	4	1.59					4
Chronic articular rheumatism	3	1.19		1		2	
Hysteria	3	1.19		1			2
Disease of the nervous system, unspecified	3	1.19		3			
Others, organs of locomotion (weak foot, 2; detached semilunar cartilage, 1)	3	1.19		2			1
Gunshot wound	3	1.19		2			1
Undiagnosed	3	1.19	3				
Entamebic dysentery	2	.79	1	1			
Diabetes mellitus	2	.79		1		1	
Neuritis	2	.79		2			
Otitis media	2	.79		1			1
Ulcer of the stomach	2	.79	2				
Arthritis	2	.79		2			
Dislocation	2	.79		1		1	
Malarial cachexia	1	.40					1
Chancroidal bubo	1	.40		1			
Benign tumor	1	.40		1			
Rheumatic fever	1	.40	1				
Exophthalmic goitre	1	.40		1			
Simple anemia	1	.40	1				
Chronic lead poisoning	1	.40				1	
Drug habit	1	.40		1			
Locomotor ataxia	1	.40		1			
Myelitis	1	.40		1			
Neuralgia	1	.40		1			
Amblyopia	1	.40					1
Pericarditis	1	.40		1			
Myocarditis	1	.40	1				
Valvular heart disease	1	.40					1
Embolism	1	.40		1			
Chronic bronchitis	1	.40		1			
Bronchopneumonia	1	.40					1
Asthma	1	.40		1			
Loss of teeth	1	.40					1
Chronic gastritis	1	.40	1				
Ankylostomiasis	1	.40					1
Inguinal hernia	1	.40		1			
Enteroptosis	1	.40		1			
Abscess of the liver	1	.40	1				
Enuresis	1	.40		1			
Corns	1	.40		1			
Necrosis	1	.40	1				
Synovitis	1	.40	1				
Burns, local	1	.40					1
Incised wound	1	.40				1	
Sprain	1	.40		1			
Secondary results of injury (impaired function of knee joint from old injury, caused by fall)	1	.40		1			
Total cases	252		32	132	5	15	68
Percentage of total cases		100.00	12.70	52.38	1.98	5.95	26.98

TABLE NO. 34.—*Movement of sick enlisted American troops in the Philippines, year 1913.*

	Mean strength.	Ratio per 1,000 of mean strength.												Average number of days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective from sickness.				From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
		From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.		For each soldier.	For each case.	For each soldier.	For each case.
										Total.	In hospital.	Total.	In hospital.				
District of Luzon	9,201	836.32	516.25	13.37	10.00	3.80	1.96	17.17	11.96	24.81	23.49	12.65	11.97	9.06	10.83	4.62	5.52
District of Mindanao	1,896	1,190.93	960.44	20.04	16.88	4.75	1.58	24.79	18.46	31.77	30.69	22.98	22.40	11.60	9.74	8.39	7.04
Philippine Department	11,188	922.06	606.45	14.14	10.89	4.66	2.55	18.80	13.44	30.91	29.64	17.57	16.91	11.28	12.24	6.41	10.58

NOTE.—Department hospital and interisland transports are not included in districts but are included in the department.

INFLUENCE OF SEASON.

Exclusive of injuries, venereal diseases, alcoholism, and vaccinia, which are not influenced by season, the highest admission rate occurred in March, and the highest noneffective rate was in January.

TABLE NO. 35.—*Influence of season on enlisted American troops in the Philippines, year 1913.*

Months.	Mean strength.	Ratio per 1,000 of mean strength.								Prevailing diseases (exclusive of venereal diseases, etc.).
		All causes.					Exclusive of venereal diseases, alcoholism vaccinia, and injuries.			
		Admissions.			Noneffective.					
		Total.	Hospital.	Deaths.	Total.	Hospital.	Admissions.	Deaths.	Noneffective.	
January	10,873	77.16	71.64	0.18	38.72	37.35	49.29	0.09	21.60	Malaria, 86; diarrhea and enteritis, 68; constipation, 35.
February	11,926	55.50	46.78	.25	30.34	28.85	34.79	.08	16.00	Malaria, 116; diarrhea and enteritis, 45.
March	11,459	82.73	77.76	.17	30.12	28.91	62.04	.09	18.29	Malaria, 315; diarrhea and enteritis, 55; constipation, 37.
April	11,403	72.35	68.58	.53	29.08	28.18	46.91	.44	17.41	Malaria, 126; diarrhea and enteritis, 52.
May	11,775	75.58	68.87	.17	29.70	28.61	52.22	.08	17.57	Malaria, 96; diarrhea and enteritis, 60; constipation, 44.
June	11,481	80.91	63.49	.61	29.74	26.88	55.74	.35	18.60	Diarrhea and enteritis, 125; malaria, 121; furuncles, 28.
July	10,884	84.80	77.08	1.19	30.08	28.44	54.94	.28	17.77	Diarrhea and enteritis, 95; malaria, 77; acute bronchitis, 30.
August	11,070	90.24	83.55	.45	32.05	30.88	60.07	.27	17.96	Malaria, 69; dengue, 67; diarrhea and enteritis, 50.
September	11,160	88.08	83.87	.36	33.23	32.11	54.75	.36	18.49	Dengue, 91; diarrhea and enteritis, 74; malaria, 62.
October	11,027	72.82	68.65	.18	31.87	30.85	48.25	.09	18.02	Dengue, 111; malaria, 48; diarrhea and enteritis, 44.
November	10,326	71.37	68.76	.39	28.31	27.63	45.81	.29	15.02	Malaria, 90; diarrhea and enteritis, 56; acute bronchitis, 20.
December	10,872	71.56	68.89	.28	27.86	27.22	41.76	.18	13.94	Malaria, 48; dengue, 39; diarrhea and enteritis, 31.
Total	11,188	922.06	846.09	4.66	30.91	29.64	606.45	2.55	17.57	Malaria, 1,254; diarrhea and enteritis, 755; dengue, 439.

The highest rate for malarial fevers was in March, and for dengue in October. The highest death rate occurred in July.

TABLE NO. 36.—*Influence of disease on enlisted American troops, by arms of service, serving in the Philippine Islands, year 1913.*

Arms of service.	Mean strength.	Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.	Ratio per 1,000 of mean strength.			
						Admitted.	Discharged on certificate of disability.	Died.	Constantly noneffective.
Infantry	5,760	4,786	98	20	164.38	830.91	16.72	3.41	28.54
Cavalry	2,259	1,801	34	5	73.07	797.25	14.79	2.18	32.35
Field Artillery	734	764	10	1	19.56	1,040.87	13.39	1.34	26.65
Coast Artillery	1,004	446	4	1	15.08	444.22	3.91	.98	15.02
Ordnance	69	28	.....	.....	1.43	405.80	.....	.....	20.76
Engineers	299	205	4	.....	6.47	685.62	13.16	.....	21.64
Signal Corps	144	82	1	1	2.95	569.44	6.80	6.80	20.46
Hospital Corps	639	353	.....	.....	9.59	552.43	.....	.....	15.01
All others	280	220	2	1	7.70	785.71	7.02	3.51	27.50
Total	11,188	8,685	153	29	300.23	776.28	13.44	2.55	26.84

PHILIPPINE SCOUTS.

An improvement in the health of the native troops in the Philippines appears for the year 1913, as compared with the preceding year. The mean strength of these troops during the year was 5,096 (Surgeon General's Office), 5,236 (The Adjutant General's Office).

CONSTANTLY NONEFFECTIVE RATES.

The constantly noneffective rate for 1913 was 18.31 per 1,000, as compared with 20.32 in 1912. The rate for disease was 14.81 per 1,000 in 1913 and 17.92 in 1912, while that of injuries was 3.49 in 1913 and 2.40 per 1,000 in 1912. The following tabulation shows noneffective rates of the principal diseases in 1913:

Malarial fevers	3.28
Venereal diseases	1.92
Bronchitis	1.03
Tuberculosis (all)	.85
Acute abscess and cellulitis	.58
Furuncle and carbuncle	.54
Mumps	.36
Dysenteries	.30
Diarrhea and enteritis	.26
Rheumatism, articular	.22

The rate for diarrhea and enteritis was exactly the same in 1913, 1912 and 1911, being 0.26 per 1,000. No typhoid or beriberi.

ADMISSIONS.

During the year there were 3,471 admissions for all causes, giving a case admission rate of 681.12 per 1,000. The rate for disease was 585.36 and that for injury 95.76 per 1,000. The admission rate for 1912 for all causes was 678.2—for disease 617.16 and for injuries 61.04 per 1,000. It is thus apparent that the admission rates for 1913 were slightly higher than the corresponding rates in 1912. The admission rate for disease only is, however, markedly lower than in 1912. The following tabulation gives the rates for some of the principal diseases in 1913:

Malarial fevers	193.49
Bronchitis	38.66
Venereal diseases	36.30
Diarrhea and enteritis	21.59
Dengue	12.75
Dysenteries	7.06
Tuberculosis (all)	6.28

TABLE NO. 37.—*Movement of sick, Philippine Scouts, enlisted men, year 1913.*

	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
	Total.	In hospital.	Total.	In hospital.
Ratios per 1,000 of mean strength:				
Admissions to sick report	681.12	621.66	548.86	.....
Discharges on certificate of disability	9.17	.....	8.59	.....
Deaths	9.17	.....	2.67	.....
Total losses	18.34	.....	11.26	.....
Noneffective	18.31	17.28	12.89	12.25
Average number of days lost:				
For each soldier	6.68	6.31	4.71	4.47
For each case	9.81	10.14	8.57	.....

DISCHARGE FOR DISABILITY.

In 1913 there were 48 discharges on certificates of disability with a rate of 9.17 as compared with 45 and a rate of 8.19 for 1912. Tuberculosis caused 37 discharges in 1913 and 23 in 1912; venereal diseases, none in 1913 and 2 in 1912; mental alienation, 1 in 1913, 5 in 1912; and external causes, 3 in 1913 and 7 in 1912.

TABLE NO. 38.—*Causes of discharge for disability, Philippine Scouts, year 1913.*

Causes of discharge.	Number discharged.	Percentage of discharges for disease.	In line of duty.	Not in line of duty.	
				Contracted before enlistment.	Contracted after enlistment.
DISEASE.					
General diseases	38	84.44	38	.....	.....
Tuberculosis (all of the lungs)	37	82.22	37	.....	.....
Leuchaemia	1	2.22	1	.....	.....
Diseases of the nervous system and organs of special sense	3	6.67	1	2	.....
Multiple sclerosis, brain and spinal cord	1	2.22	1	.....	.....
Dementia praecox	1	2.22	.....	1	.....
Epilepsy, Jacksonian	1	2.22	.....	1	.....
Diseases of the circulatory system	1	2.22	1	.....	.....
Valvular disease of the heart	1	2.22	1	.....	.....
Diseases of the respiratory system	1	2.22	1	.....	.....
Bronchitis, chronic	1	2.22	1	.....	.....
Diseases of the digestive system	1	2.22	1	.....	.....
Appendicitis	1	2.22	1	.....	.....
Diseases of the genito-urinary system	1	2.22	1	.....	.....
Chronic interstitial nephritis	1	2.22	1	.....	.....
Total	45	100.00	43	2	.....
EXTERNAL CAUSES.					
Gunshot wounds (rifle 2)	2	66.67	2	.....	.....
In action	1	33.33	1	.....	.....
While quelling fight between soldiers	1	33.33	1	.....	.....
Cut by bolo, in action	1	33.33	1	.....	.....
Total	3	100.00	3	.....	.....
Total for disease	45	93.75	43	2	.....
Total for external causes	3	6.25	3	.....	.....
Grand total	48	100.00	46	2	.....

DEATHS.

There were 48 deaths with a rate of 9.17 per 1,000 in 1913, and 24 with a rate of 4.37 in 1912. There was 1 death from tuberculosis in 1913 and 4 in 1912; 3 from malarial fever in 1913 and 3 in 1912; 2 from pneumonia (acute lobar) in 1913 and 2 in 1912; 3 from purulent infection and septicemia; 34 from external causes in 1913 and 7 in 1912. There were 32 killed in action, 30 by gunshot and 2 by bolo. There was 1 death from homicide. In 1911 there was no death in action among these troops and in 1912 only 3.

TABLE NO. 39.—*Causes of death among Philippine Scouts, year 1913.*

Causes of death.	Number of deaths.	Ratio per 1,000 of—	
		Mean strength.	Total deaths.
DISEASES.			
Malarial fevers	3	0.57	214.29
Estivo-autumnal	1	.19	71.43
Quartan pernicious	1	.19	71.43
Tertian malignant	1	.19	71.43
Purulent infections	3	.57	214.29
Pneumonia—lobar	2	.38	142.86
Smallpox	1	.19	71.43
Tuberculosis of the lungs	1	.19	71.43
Dementia praecox	1	.19	71.43
Appendicitis	1	.19	71.43
General peritonitis, septic	1	.19	71.43
Gangrene	1	.19	71.43
Total	14	2.67	1,000.00
EXTERNAL CAUSES.			
Homicidal	2	.38	58.82
By revolver, comrade	1	.19	29.41
By ax, escaping convict	1	.19	29.41
Wounds received in action	32	6.11	941.18
By gunshot	30	5.73	882.35
By barong	2	.38	58.82
Total	34	6.49	1,000.00
Total for disease	14	2.67	291.67
Total for external causes	34	6.49	708.33
Grand total	48	9.17	1,000.00

SPECIAL DISEASES.

TYPHOID FEVER.

No case of this disease occurred during 1913.

MALARIAL FEVERS.

The admission rate for all fevers of this class was 193.49, as compared with 241.91 in 1912. The cause that lessens the venereal rate among the native troops operates in like manner to increase the malarial rate. The majority of them, being married men, sleep to a greater or less extent outside of the barracks, and probably without the protection of mosquito nets. Naturally, they are more in native houses and among people highly infected with malaria.

VENEREAL DISEASES.

These diseases constitute the second cause of admission among these troops. The admission rate was 36.30 per 1,000, as compared with 55.67 for 1912. There were 150 admissions for gonorrhea, 17 for chancroid, and 18 for syphilis in 1913, as compared with 225, 48, and 28, respectively, in 1912. These diseases caused about one-sixteenth of the total number of admissions for disease, while among the American troops in the Philippines they caused about one-sixth of the total. The noneffective rate was 1.92 per 1,000 as compared with 3.75 per 1,000 for 1912. This good showing of the native is to a large extent due to the fact that a large percentage of them are married. It is also apparent that prophylactic measures have been more effectively carried out during 1913.

SMALLPOX.

There were 7 cases of this disease with 1 death. In 1912 there were 2 cases without a death or discharge.

CHOLERA.

No case of this disease occurred during the year.

TUBERCULOSIS.

There were 32 cases of this disease, the admission rate being 6.28 per 1,000. There was 1 death and 37 discharges.

DYSENTERIES.

There were 36 cases, 21 of them being entamebic, the admission rate being 7.06 as compared with 7.03 for 1912 and 7.79 for 1911. No death resulted.

DENGUE.

There were 65 cases, the admission rate being 12.75 as compared with 23.12 per 1,000 for 1912.

DIARRHEA AND ENTERITIS.

The admission rate was 21.59 as compared with 18.86 for 1912.

ALCOHOLISM AND RESULTS.

There was one case. The admission rate was 0.20.

BERIBERI.

No case of this disease occurred during the year.

UNDETERMINED FEVERS.

There were 33 cases in 1913. The admission rate for febricula and undetermined fevers was 6.48 in 1913 and 10.36 per 1,000 in 1912. No nonefficiency was caused by venomous bite or sting.

SURGICAL OPERATIONS.

TABLE No. 40.—*Surgical operations performed on Philippine Scouts, 1913.*

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	EYE.										
Extraction	Cataract, traumatic	1	1					1			
Curetment and cauterization	Keratitis	1	1							1	
Transplantation	Pterygium	5	5							5	
Incision and curetment	Abscess of lid	1	1							1	
	NOSE.										
Cauterization of mucous membrane over both inferior turbinates.	Frontal sinusitis	1	1								1
Removal with snare	Polypus	1	1							1	
	MOUTH AND PHARYNX.										
Incision	Alveolar abscess	1		1			1				
Do	Abscess of pharynx	1	1							1	
	NECK AND THORAX.										
Strumectomy, Mayo	Exophthalmic goiter	1	1					1			
Resection of eighth rib, 1; thoracotomy, 1.	Empyema	2	2					1		1	
Paracentesis	Pleurisy, serofibrinous	1		1						1	
	ABDOMEN.										
Appendectomy with drainage.	Appendicitis	3	2			1		3			
Laparotomy and suture of intestinal wounds.	Gunshot wound of abdomen.	1			1			1			
Bassini's operation, 1; Bassini's modified operation, 2; Ferguson's operation, 1.	Inguinal hernia	4	4					3	1		
	ANUS AND RECTUM.										
Incision and drainage, 3; incision curetment and drainage, 1; enlargement of original incision, 1.	Ischiorectal abscess	5	3	2				2		3	
Incision and drainage	Abscess of rectum	1	1				1				
Incision and drainage, 1; incision and curetment, 1; enlargement of original incision, 1.	Fistula in ano	3	2	1				2			1
Clamp and cautery, 1; excision, 1; ligation and excision, 1.	Hemorrhoids	3	3					3			
Incision and drainage	Fistulous openings of infected partially obliterated lumen of hemorrhoidal vessels.	1	1					1			

TABLE NO. 40.—*Surgical operations performed on Philippine Scouts, 1913*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	GENITO-URINARY SYSTEM.										
Epididymectomy	Epididymitis	3	3					3			
Meatotomy	Congenital stricture of meatus.	1	1								1
Incision and drainage	Perineal abscess	1	1					1			
	VASCULAR SYSTEM.										
Distal ligation	Aneurism	1			1			1			
Ligation of artery	Severed dorsalis pedis artery.	1	1								1
	SKIN AND CELLULAR TISSUE.										
Excision, 5; partial excision, 2; splitting and removal, 1; avulsion, 3; Cotting's operation, 1.	Ingrowing toenail	12	12							11	1
Excision of affected portion of nail.	Onychia	1	1							1	
Excision	Verruca	1	1					1			
Incision and curetment, 2; incision and drainage, 25.	Abscess	27	27					1		14	12
Crucial incision, 1; excision of affected area, 1; injection 2 per cent alcoholic solution of salicylic acid, 1; incision and curetment, 1.	Carbuncle	4	3	1				1		2	1
Incision and drainage	Cellulitis	8	8							5	3
	LYMPHATIC GLANDS.										
Adenectomy, 4; incision and drainage, 7.	Adenitis, inguinal venereal	11	11				2	2		6	1
Incision and curetment	Adenitis, nonvenereal	2	2				1			1	
Incision and drainage	Adenitis tuberculous	1			1						1
	MUSCLES AND TENDONS.										
Excision	Ganglion	1	1							1	
	NERVOUS SYSTEM.										
Suturing together tendons of biceps and triceps.	Musculo-spiral paralysis	1	1							1	
Exposure and release of musculo-cutaneous nerve from surrounding scar tissue.	Old gunshot wound of shoulder.	1		1						1	
	BONES.										
Application of Lane bone plate.	Incised wound severing clavicle.	1	1					1			
Separation of faulty union and application of Lane bone plate.	Gunshot fracture of humerus.	1		1				1			
Removal of Lane bone plate	do	1	1					1			
Excision of necrosed bone	Osteomyelitis of finger	1	1					1			
	AMPUTATION.										
Amputation arm, upper third.	Gunshot wound of arm	1	1					1			
	TUMORS.										
Excision	Epithelioma of heel	1	1							1	
Do	Lipoma of shoulder	1	1					1			
Do	Papilloma of lip	1	1								1
Do	Sebaceous cyst	5	5							5	
Do	Tumor benign, name not stated.	4	4							4	

TABLE No. 40.—*Surgical operations performed on Philippine Scouts, 1913*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	FOREIGN BODIES.										
Exploratory incision and removal.	Piece of brass jacket of bullet.	1	.....	1	.....	.....	.....	1	.....	.....	.....
Incision and extraction	Bullet	8	8	.....	.....	.....	.....	2	.....	4	2
Do	Fragment of lead	1	1	.....	.....	.....	.....	.....	.....	1	.....
	MISCELLANEOUS.										
Suturing	Incised wound of hand	1	1	.....	.....	.....	.....	.....	.....	1	.....
Do	Bolo wound of hand	1	1	.....	.....	.....	.....	.....	.....	.....	1
Total number of cases		143	130	9	3	1	5	37	1	73	27

INFLUENCE OF SEASON.

Excluding injuries, venereal diseases, alcoholism, and vaccinia as uninfluenced by the seasons, the highest admission rate was in August, and the lowest in April. The highest noneffective rate was in March, and the lowest in May. The highest rate for malarial fevers was in March; for American troops, it was also in March.

TABLE No. 41.—*Influence of season on Philippine Scouts, year 1913.*

Months.	Mean strength.	Ratio per 1,000 of mean strength.								Prevailing diseases (exclusive of venereal diseases, etc.).
		All causes.					Exclusive of venereal diseases, alcoholism, vaccinia, and injuries.			
		Admissions.		Deaths.	Noneffective.		Admissions.	Deaths.	Noneffective.	
		Total.	Hospital.		Total.	Hospital.				
January	5,075	53.79	44.33	1.58	18.57	16.62	41.57	0.39	13.58	Malaria, 53; constipation, 22; dengue, 14.
February	5,023	46.98	42.20	.20	19.35	18.53	38.22	.20	14.31	Malaria, 60; dengue, 15; acute bronchitis, 13.
March	5,160	61.24	56.98	.39	18.12	16.97	51.74	.19	14.88	Malaria, 149; constipation, 26; acute bronchitis, 14.
April	5,530	34.18	32.55	.18	12.22	11.76	26.94	....	8.87	Malaria, 42; constitpation, 10.
May	5,653	38.56	36.79	.18	12.46	12.17	30.25	.18	8.63	Malaria, 44; acute bronchitis, 14; constipation, 13.
June	5,491	64.29	56.64	2.91	18.25	17.18	48.81	.18	12.27	Malaria, 110; furuncles, 19; constipation, 17.
July	5,040	61.51	55.95	.79	21.50	20.59	53.17	.20	14.29	Malaria, 87, constipation, 29; acute bronchitis, 19.
August	5,039	68.86	63.11	.60	19.62	18.47	56.76	.20	13.69	Malaria, 112; constipation, 32; acute bronchitis, 19.
September	5,262	67.09	62.72	.38	20.95	19.07	53.41	.19	14.71	Malaria, 96; acute bronchitis, 25; constipation, 20.
October	5,099	66.48	61.97	1.37	19.78	18.67	54.13	.39	13.46	Malaria, 81; acute bronchitis, 25; furuncles, 14.
November	4,470	61.75	57.50	.45	20.25	19.61	50.56	.45	13.62	Malaria, 91; diarrhea and enteritis, 20; acute bronchitis, 14.
December	4,315	60.49	54.46	.23	21.19	20.23	46.82	.23	14.00	Malaria, 67; constipation, 17.
Total	5,096	681.12	621.66	9.17	18.31	17.28	548.86	2.67	12.89	Malaria, 986; constipation, 222; acute bronchitis, 182.

Prevalence of Diseases, by Races, in the Philippines.

In making this comparison it is to be borne in mind that the native troops were serving in their own country under conditions natural to them, and to which American troops are not accustomed.

The admission and constant noneffective rates were much lower for the Philippine than for the American troops serving in the Philippines. The admission rate for American troops being 922.06 and for the Philippine 681.12, while the noneffective rate for the American troops was 30.91, and for the Philippine 18.31. The death and discharge rates for the Philippine troops were the same, 9.17 per 1,000, while the discharge rate for American troops was 14.14 and the death rate 4.66.

The rates for the white and American colored troops and Scouts are compared in the following tabulation:

	White.	Colored.	Scouts.
Admission rate	935.69	851.46	681.12
Noneffective rate	31.35	28.63	18.31
Death rate	4.49	5.52	9.17
Discharge rate	14.00	14.91	9.17

Table No. 42.—*Important diseases by races, Philippine Islands, year 1913.*

Diseases.	Admission rates.			Diseases.	Admission rates.		
	White troops.	Colored troops.	Philippine scouts.		White troops.	Colored troops.	Philippine scouts.
Venereal diseases	140.77	194.37	36.30	Trichophytosis	8.96	8.28	18.45
Malaria	126.27	38.65	193.49	Hemorrhoids	7.36	9.39	1.18
Diarrhea and enteritis	72.30	42.52	21.59	Appendicitis	6.93	.55	.59
Bronchitis, acute and chronic	28.47	25.40	38.66	Tuberculosis	6.29	8.83	6.28
Furunculosis	24.42	16.57	22.96	Articular rheumatism, acute and chronic	4.69	6.63	3.73
Dysentery	23.89	4.97	7.06	Conjunctivitis	4.16	3.87	13.74
Dengue	22.93	123.69	12.75	Intestinal parasites	3.09	1.66	4.32
Alcoholism	22.29	10.49	.20	Influenza	1.71	.....	1.18
Tonsillitis (all)	17.17	23.19	3.34	Pneumonia (lobar)	1.07	2.76	2.16
Muscular rheumatism	9.60	19.33	7.26				

SANITATION IN THE PHILIPPINE ISLANDS.

The department surgeon reports as follows:

SANITATION.

Sanitary conditions of the different posts and the accommodations provided for troops are generally satisfactory.

While the gratifying reduction in the morbidity rate indicates improved sanitary conditions at posts, ideal conditions can not be attained for the reason that in many places adverse local conditions exist in adjoining barrios over which the military authorities can not exercise control.

ANTIMALARIAL MEASURES.

Antimalarial measures are being carried out at all posts in the islands, including drainage and oiling of pools, cutting away high grass and brush and other general measures for prevention and destruction of mosquitoes, and the enforced use of mosquito nets. Greater attention has also been given to the treatment of malarial cases in order to prevent recurrences.

DISPOSAL OF WASTES.

The general sanitary condition of the island of Corregidor, on which Fort Mills is located, is not satisfactory. Much of the ground in and about the post is polluted by drains from the battery latrines which are not connected up with sewers, by the latrine pits of the infantry that was camped there for many months, and by the large number of civilian prisoners engaged.

WATER SUPPLY.

At no post is raw water used for drinking purposes; except where artesian water is available, it is either distilled or boiled. All organizations are now supplied with mechanical filters and their use insisted upon in the field whenever it is impracticable to boil the drinking water.

FOOD SUPPLY.

Several epidemics of food poisoning occurred at different posts. A special investigation was made in each instance, and it is probable that they resulted from the ingestion of spoiled food.

The question of what should be the composition of the rations to be kept in reserve at fortified places presented itself, and I directed Capt. Ferdinand Schmitter, of the Board for the Study of Tropical Diseases, to institute a series of experiments to determine the antiscorbutic value of certain canned vegetables. The results of these experiments were very satisfactory, and add considerably to our knowledge of the subject.

The experiments were conducted on guinea pigs, which react to scurvy-producing diets in much the same way as human subjects, and some very interesting data were obtained. It was shown that if canned cabbage, canned tomatoes, or canned sauerkraut were added to a diet which invariably produced scurvy in guinea pigs, the appearance of the disease was prevented and the animals gained in weight and remained in excellent condition.

Improvements have been made in the immediate surroundings of some posts, notably Camp Stotsenburg, that should assist in reducing the frequency of malaria. These measures are principally the cutting away of dense underbrush and grass, and surface drainage.

The completion of the screening of occupied buildings in posts is also one of the most important measures necessary to a lower malarial incidence.

CLOTHING.

Complaints and recommendations are still made relative to the compulsory use at all times of the legging. The use of trousers, especially when off duty, would make materially for the comfort of our troops.

Entirely satisfactory headgear for the Tropics seems not yet to have been devised. The campaign hat is apparently much better adapted than the cap, but it does not afford the same amount of protection to the head from the sun as does the tropical helmet.

HAWAII.

Oahu, on which is situated the city of Honolulu, is the only garrisoned island of the Hawaiian group. The mean enlisted strength of the garrison during the year 1913 was 6,130 as compared with 3,376 during 1912. Of these 6,130, 5,082 were white and 1,048 colored troops. Though possessing a salubrious and temperate climate, except the death and discharge rates, all rates were higher than for the United States. The average number of days treatment for each case was 12.58 days, as compared with 13.51 for the United States.

The admission rate in 1913 was 701.63 per 1,000 as compared with 936.32 for 1912. The rate for disease in 1913 was 526.59 per 1,000 and for external causes 175.04. That for disease in 1912 was 680.69 and for external causes 255.63. Some of the principal diseases causing the highest admission rates were: Venereal disease, 91.68 per 1,000; diarrhea and enteritis, 21.04; bronchitis, 56.12; and diseases of the pharynx, 35.56. No nonefficiency was caused by venomous bite or sting. A little less than one fourth of the total nonefficiency for diseases and a little less than one fifth of the total number of admissions were caused by venereal diseases.

The constantly noneffective rate was 24.18 per 1,000 in 1913, as compared with 33.44 for 1912. The rate for disease was 19.23 and that for external causes 4.95 per 1,000, as compared with 26.57 for disease and 6.88 for injuries in 1912. The diseases causing the highest noneffective rates were: Venereal disease, 5.04; bronchitis, 1.07; appendicitis, 0.88; and diarrhea and enteritis, 0.23.

The rate for discharge for disability was 10.07 per 1,000, 9.43 being for disease and 0.64 for external causes. In 1912 the total rate was 18.07, that for disease being 16.29 and that for external causes 1.78 per 1,000.

The death rate was 3.67 per 1,000 as compared with 3.85 in 1912. In actual numbers, 23 deaths occurred, 10 being due to external causes and 13 to disease. Four of these deaths from external causes were due to drowning.

In 1913 there were 106 enlisted men invalided home. In 1912 there were 78 enlisted men invalided home from the Hawaiian Islands. The diseases or conditions causing the highest number of men to be invalided home were: Mental alienation, 28; venereal diseases, 7; flat foot, 4; tuberculosis, 22; and neurasthenia, 6.

Tables Nos. 3 and 74 on pages 32 and 260 give figures for troops serving in Hawaii.

TABLE No. 44.—*Influence of station, year 1913, Hawaii, on officers and enlisted men*

	Mean strength.	Ratio per 1,000 of mean strength.												Average number days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective rates.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
										From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.					
		From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
Schofield Barracks	4,049	812.30	499.63	12.39	10.84	2.72	1.23	15.11	12.07	17.39	14.32	9.25	7.83	6.35	7.81	3.38	6.76
Fort Shafter	1,167	511.57	298.20	10.70	8.03	.....	.....	10.70	8.03	.79	.....	.35	.....	.29	.57	.13	.43
Fort Ruger	299	267.56	160.54	3.48	3.48	3.34	3.34	6.82	6.82	.63	.....	.14	.....	.23	.86	.05	.31
Fort Kamehameha	281	498.22	266.91	3.69	3.69	3.56	.....	7.25	3.69	7.06	.....	1.65	.....	2.54	5.17	.60	2.25
Fort De Russey	188	207.45	106.38	5.49	5.49	.....	.....	5.49	5.49	1.11	.....	.83	.....	.40	1.95	.30	2.85
Fort Armstrong	61	1,065.57	737.70	.....	.....	.....	.....	.....	.....	2.96	.....	2.20	.....	1.08	1.02	.80	1.09
Field, etc	227	568.28	422.91	.....	.....	.....	.....	.....	.....	1.91	.37	1.46	.28	.70	1.22	.53	1.26
Department hospital	126	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Total officers and enlisted men	6,398	697.41	425.77	10.07	8.63	3.51	1.83	13.58	10.46	23.85	21.28	13.93	12.78	8.71	12.48	5.85	11.94
Total enlisted men	6,130	701.63	423.49	10.07	8.63	3.67	1.92	13.74	10.55	24.18	22.06	14.04	13.22	8.83	12.58	5.13	12.10

Admission rates for some of the principal diseases for Hawaii, American troops (enlisted men).

	1913	1912		1913	1914
Venereal diseases	91.68	122.93	Alcoholism (all)	11.42	15.40
Bronchitis	56.12	22.51	Appendicitis	9.62	7.70
Furuncle	33.77	55.98	Cellulitis	9.30	16.88
Influenza	26.10	38.51	Malarial fevers	8.48	6.22
Tonsillitis	23.00	33.47	Tuberculosis (all)	4.24	2.07
Diarrhea and enteritis	21.04	44.14	Rhinitis, acute	4.08	20.73
Constipation	17.62	13.92	Lymphadenitis, nonvenereal	2.77	8.29
Gastritis, acute and chronic	15.00	12.15	Rheumatism, acute and chronic, articular	1.79	6.81
Muscular rheumatism	13.38	9.48			

Noneffective rates for some of the principal diseases for Hawaii, American troops (enlisted men).

	1913	1912		1913	1912
Venereal diseases	5.04	8.69	Cellulitis	0.25	0.52
Bronchitis	1.07	.69	Diarrhea	.23	.60
Appendicitis	.88	.65	Rheumatism, acute and chronic, articular	.21	.49
Furuncle	.56	.96	Constipation	.16	.24
Influenza	.43	.62	Malarial fevers	.16	.15
Muscular rheumatism	.37	.53	Alcoholism (all)	.15	.12
Gastritis, acute and chronic	.37	.35	Lymphadenitis, nonvenereal	.11	.34
Tonsillitis	.33	.61	Rhinitis, acute	.05	.20
Tuberculosis (all)	.32	.33			

PANAMA CANAL ZONE.

The mean enlisted strength of troops serving in the Panama Canal Zone during the year 1913 was 797. This force consisted of Infantry and detachments of Hospital Corps and noncommissioned staff.

The admission rate for all causes was 873.20, that for disease being 745.29 and that for external causes being 107.90. The diseases causing the highest admission rates were: Venereal diseases, 196.99 per 1,000; malarial fevers, 145.55; diseases of the pharynx, 38.90; and influenza, 32.62.

The noneffective rate was 30.23 for all causes, that for disease being 26.61 per 1,000, and that for external causes, 3.61. The diseases causing the highest noneffective rates were: Venereal diseases, 5.41 per 1,000; malarial fevers, 5.31; lymphadenitis, 1.71; appendicitis, 1.59; mental alienation, 0.80; and tuberculosis, 0.68.

The rate for discharges on certificates of disability was 38.90.

The death rate was 6.27 per 1,000, that for disease being 1.25, and that for external causes, 5.02. In all there were 6 deaths, including 1 among officers. Included in this number were 5 deaths from drowning.

Thirty men were invalided home, 9 being for flat foot, 3 for tuberculosis, 2 for organic disease of the heart, and 3 for diseases of the joints.

Tables Nos. 3 and 73, pages 32 and 254, give all the figures for troops serving in the Canal Zone.

Admission rates for some of the principal diseases for Panama Canal Zone, American troops (enlisted men).

	1913	1912		1913	1912
Venereal diseases	196.99	68.56	Muscular rheumatism	10.04	7.76
Malarial fevers	145.55	120.31	Rhinitis, acute	6.27	41.40
Tonsillitis	36.39	62.10	Hemorrhoids	6.27	10.35
Influenza	32.62	37.52	Diarrhea and enteritis	5.02	12.94
Furuncle	23.84	12.94	Rheumatism, articular (all)	5.01	16.82
Lymphadenitis, nonvenereal	21.33	3.88	Dysentery	3.76	6.47
Bronchitis	20.08	25.87	Pleurisy	3.76	7.76
Flat foot	12.55	10.35	Tuberculosis (all)	3.76	7.76
Alcoholism (all)	16.29	6.47			

Noneffective rates for some of the principal diseases for Panama Canal Zone, American troops (enlisted men).

	1913	1912		1913	1912
Venereal diseases	5.41	3.16	Hemorrhoids	0.30	0.52
Malarial fevers	5.31	5.60	Muscular rheumatism	.19	.05
Lymphadenitis, nonvenereal	1.71	.23	Dysentery	.15	.35
Tonsillitis	.91	1.74	Pleurisy	.12	.73
Tuberculosis (all)	.68	.90	Diarrhea and enteritis	.10	.11
Influenza	.56	1.20	Alcoholism (all)	.10	.05
Bronchitis	.55	.30	Rheumatism, articular (all)	.05	.59
Flat foot	.52	.82	Rhinitis, acute	.02	.16
Furuncle	.36	.13			

PORTO RICO.

The troops were all recruited and partly officered by native Porto Ricans. The regiment is commanded by a United States Army officer. The two garrisoned posts had a mean strength for 1913 of 594.

TABLE NO. 45.—*Movement of sick in Porto Rico, years 1913 and 1912—native troops.*

	Years.	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
		Total.	In hospital.	Total.	In hospital.
Ratios per 1,000 of mean strength:					
Admissions to sick report	1913	818.18	796.30	638.05	.....
	1912	1,142.86	977.89	921.77	.....
Discharges on certificate of disability	1913	8.42	.....	6.73	.....
	1912	6.80	.....	5.10	.....
Deaths	1913	3.37	.....	3.37	.....
	1912	3.40	.....	.....	.....
Total losses	1913	11.79	.....	10.10	.....
	1912	10.20	.....	5.10	.....
Noneffective	1913	24.58	24.07	16.23	16.12
	1912	28.08	25.62	16.30	14.44
Average number of days lost:					
For each soldier	1913	8.97	8.78	5.92	5.88
	1912	10.28	9.37	5.97	5.28
For each case	1913	10.97	11.03	9.28	.....
	1912	8.99	9.59	6.47	.....

The admission rate in 1913 was 818.18, as compared with 1,142.86 in 1912. The diseases with the highest admission rates for 1913 and 1912 were:

Diseases.	1913	1912
Acute abscess and cellulitis	79.12	61.22
Venereal diseases	77.44	105.44
Diarrhœa and enteritis	69.02	112.24
Diseases of the nasal fossa	62.29	32.31
Malarial fevers	31.99	52.72

It will thus be seen that the rate for venereal diseases and malaria shows a very marked improvement.

TABLE NO. 46.—*Diseases of native Porto Rican troops, admission rates per 1,000 of mean strength, years 1909–1913.*

	1913	1912	1911	1910	1909
Acute abscess and cellulitis	79.12	61.22	10.35	8.46	14.11
Venereal diseases	77.44	105.44	191.38	162.44	250.44
Chancroid and results	30.30	57.82	101.72	55.84	89.95
Gonorrhea and results	30.30	30.61	60.34	74.45	126.98
Syphilis and results	16.84	17.01	29.31	32.15	33.51
Diarrhœa and enteritis	69.02	112.24	12.07	20.30	29.98
Malarial fevers	31.99	52.72	131.03	74.45	179.89
Influenza	25.25	13.60	46.55	23.69	82.89
Ankylostomiasis	21.89	69.73	96.55	76.14	8.82
Dysentery	8.42	34.01	18.97	22.00	14.11
Filariasis	8.42	1.70	20.69	28.76	22.93
Furuncle	5.05	66.33	44.83	57.53	109.35
Rheumatism, articular (all)	3.37	11.90	3.45	1.69	8.82
Bronchitis, acute and chronic	.....	10.20	15.52	20.30	29.98
Smallpox	.....	1.70	6.90	1.69	3.53
Typhoid fever	.....	.....	1.72	5.08	5.29
Measles	.....	.....	.....	1.69	17.64
Febricula and undetermined fevers	.....	13.61	1.72	.....	3.53

The noneffective rate is also lower than for the preceding year, being 24.58 for 1913, and 28.08 for 1912. The rate for disease was 21.43 as compared with 26.23 in 1912. The most marked improvement was in the smaller amount of venereal diseases. Less malarial disease is also noted.

Some of the diseases with the highest noneffective rates for 1913 and 1912 were:

Diseases.	1913	1912
Venereal diseases	4.89	9.57
Diarrhœa and enteritis	.66	1.24
Malarial fevers	.59	.81
Ankylostomiasis	.31	1.21
Dysenteries	.14	1.03

The rate for discharge for disability was 8.42 per 1,000 for disease. In 1912 the rate was 6.80 per 1,000, all for disease. The death rate was 3.37 per 1,000. The actual number of deaths was 2. Both were due to disease. In 1912 there were 2 deaths due to external causes.

CHINA.

The mean enlisted strength of the troops serving in China during 1913 was 1,216. This force consisted of Infantry, a detachment of Signal Corps, Hospital Corps, and noncommissioned staff, all white.

The admission rate for all causes was 911.18, that for disease being 754.93 and that for external causes, 156.25. The diseases causing the highest admission rates were: Venereal, 226.15 per 1,000; influenza, 57.57; diarrhea and enteritis, 42.76; diseases of the pharnyx, 36.18; and alcoholism, 24.67. There were 4 cases of tuberculosis.

The noneffective rate was 26.91 for all causes, the rate for disease being 23.68 and that for external causes 3.23. The diseases causing the highest noneffective rates were: Venereal diseases, 9.28 per 1,000; pneumonia, lobar, 1.05; mumps, 0.86; influenza, 0.85; mental alienation 0.80; pleurisy, 0.67; appendicitis, 0.60; tuberculosis, 0.58; and typhus fever, 0.43.

The discharge rate was 4.93 for all causes. The death rate was 9.05 per 1,000, the rate for disease being 4.11 and that for external causes being 4.93.

Tables Nos. 3 and 73, pages 32 and 254, give all figures for the troops serving in China for the year 1913.

Admission rates for some of the principal diseases for China, American troops (enlisted men).

	1913	1912		1913	1912
Venereal diseases	226.15	203.28	Pleurisy	16.45	0.91
Influenza	57.57	42.84	Furuncle	14.80	14.59
Constipation	55.92	9.12	Malarial fevers	13.16	5.47
Diarrhea and enteritis	42.76	33.73	Pneumonia (lobar)	9.05	10.03
Tonsillitis	26.32	22.79	Rheumatism, articular (all)	6.58	7.29
Alcoholism (all)	24.67	22.79	Appendicitis	4.11	8.20
Mumps	24.67	10.03	Tuberculosis (all)	3.29	.....
Bronchitis	22.20	16.41	Typhus fever	2.47	.91
Muscular rheumatism	20.56	10.03	Dysentery	.82	10.03
Lymphadenitis, nonvenereal	18.91	8.20			

Noneffective rates for some of the principal diseases for China, American troops (enlisted men).

	1913	1912		1913	1912
Venereal diseases	9.28	13.55	Constipation	0.44	0.09
Pneumonia (lobar)	1.05	.57	Typhus fever	.43	.10
Mumps	.86	.49	Diarrhea and enteritis	.35	.34
Influenza	.85	.54	Tonsillitis	.35	.24
Lymphadenitis, nonvenereal	.75	.32	Alcoholism (all)	.25	.25
Pleurisy	.67	.12	Bronchitis	.28	.26
Appendicitis	.60	.31	Malarial fevers	.24	.08
Tuberculosis (all)	.58	.....	Furuncle	.19	.31
Muscular rheumatism	.46	.26	Dysentery	.14	.44
Rheumatism, articular (all)	.46	.66			

Comparison of rates (per 1,000 of mean strength), year 1913.

	Admissions.	Non-effective.	Discharges.	Deaths.
American troops:				
United States	619.90	22.94	13.45	4.95
Alaska	495.18	13.62	9.64	4.38
Philippine Islands	922.06	30.91	14.14	4.66
China	911.18	26.91	4.93	9.05
Hawaii	701.63	24.18	10.07	3.67
Panama, Canal Zone	853.20	30.23	38.90	6.27
The Army	671.78	24.33	13.24	4.86
Native troops:				
Porto Rican regiment	818.18	24.58	8.42	3.37
Philippine Scouts	681.12	18.31	9.17	9.17

Comparative rates, per 1,000 of mean strength.

	Venereal diseases.		Malarial fevers.		Tuberculosis.	
	Admissions.	Non-effective.	Admissions.	Non-effective.	Admissions.	Non-effective.
American troops:						
United States	85.83	3.58	8.79	0.18	3.07	2.34
Alaska	25.42	.76	1.75	.03	1.75	.53
Philippine Islands	149.45	8.92	112.08	2.31	6.70	.56
China	226.15	9.28	13.16	.24	3.29	.58
Hawaii	91.68	5.04	8.48	.16	4.24	.32
Panama, Canal Zone	196.99	5.41	145.55	5.31	3.76	.68
The Army	97.22	4.51	24.75	.53	3.66	1.94
Native troops:						
Porto Rican regiment	77.44	4.89	31.99	.59	11.78	1.37
Philippine Scouts	36.30	1.92	193.49	3.28	6.28	.85

BOARDS FOR THE STUDY OF TROPICAL DISEASES.

During the year 1913 the board for this purpose, which was stationed in Manila, was composed of Maj. Percy M. Ashburn, January 1 to July 28; Capt. Edward B. Vedder, January 1 to April 19; Capt. Ferdinand Schmitter, June 3 to December 31; and Lieut. Ernest R. Gentry, January 1 to April 1.

Maj. Ashburn left Manila on July 28 for Tientsin, China, for the purpose of investigating the diseases and the sanitary conditions present among the Chinese in the vicinity of the stations occupied by the American troops. A very interesting report of this trip was furnished by Maj. Ashburn to this office and published in the February, 1914, issue of the Military Surgeon. Upon completion of this duty in China, Maj. Ashburn returned to this country and, after some time spent upon leave of absence, he proceeded to the Canal Zone for the study of tropical diseases as they exist there.

Since July 28, 1913, the board at Manila has consisted of Capt. Schmitter alone. The following report of work done, with the exception of that on scurvy, was done by him.

All the reports and articles by the board received in this office up to July 1, 1913, were incorporated in the last annual report. In like manner all reports received up to July 1 of this year have been incorporated in this report.

THE PREVENTION OF SCURVY.

In accordance with a request from the department headquarters some experiments were instituted relative to the prevention of scurvy.

Five sets of guinea pigs were fed on the following exclusive diets:

No. I. Bread, oats, and water. This is a recognized scorbutic diet.

No. II. Diet I plus yeast, heated to 60° C. for one hour, 1 c. c. to 100 grams body weight, daily.

No. III. Diet I plus live brewery yeast. 1 c. c. grams body weight daily.

No. IV. Diet I plus mongo beans, uncooked.

No. V. Diet I plus mongo sprouts, uncooked.

All guinea pigs fed on bread, oats, and water, or the latter plus both live yeast and cooked yeast, died with scorbutic symptoms in from 20 to 33 days of the experiment, showing the inefficiency of yeast to prevent scurvy. Of the three guinea pigs fed on bread, oats, and water plus mongo beans all lost weight and one died on the 29th day. The two which lived on the 45th day, when the experiment was discontinued, were sickly, with loss of weight and disappearance of gloss from the hair.

The pigs fed on bread, oats, water, and mongo sprouts all gained weight, retained their glossy coats, and were in a perfectly healthy condition on the 45th day.

All of the pigs which died showed the appearance of scurvy in more or less degree, to wit, loose teeth, very fragile lower jaw bones, rosary at ribs, hemorrhagic condition of bones at epiphyses with ready separation of the latter. The following table shows the number of days survived by each pig on its special diet:

Diet.	Number of pigs.	Day of death.			
Bread, oats, water	4	29	31	33	33
Bread, oats, water, yeast, heated to 60°	4	30	31	32	33
Bread, oats, water, live yeast	4	20	25	29	32
Bread, oats, water, mongo beans, uncooked	3	29	.....	.....	.....
Bread, oats, water, mongo sprouts	4	.....	.....	.....	.....

Later experiments showed that canned cabbage was quite an efficient preventative and that boiling for one hour does not decrease the efficiency, as observed in guinea pigs.

HYDROPHOBIA.

A large monkey was brought to the board from the Province of Laguna by a native who stated that the animal had been caught the previous day in the forest. The animal appeared unusually excited when received, the following day became savage and frothed at the mouth, and on the third day died with paralysis of the hind legs and muscles of deglutition. At autopsy there were no macroscopic lesions to suggest a cause of death. Microscopic examination of the hippocampus showed negri bodies in both smear and section. Emulsified tissue was injected into the brain of a rabbit, which developed a partial paralysis of the hind legs three weeks later. He was still alive after a month, making it doubtful as to whether the paralysis is due to rabies or cerebral injury from the injection.

GANGOSA.

Experiments were conducted by Capt. Schmitter to determine whether there is any etiological relationship between gangosa and similar mutilative ulcerative conditions to yaws or syphilis. Two cases of gangosa were studied at San Lazaro Hospital. Both gave positive double plus Wassermann reactions. The luetin test was also positive, but much less marked than the vigorous reaction usually seen in syphilitics with similarly extensive lesions. He concluded that this would suggest a related organism rather than that of syphilis itself. Tissue clipped from the margins of the ulcer, crushed in salt solution, and examined with the dark field showed a large number of treponemata. Animal experiments were negative excepting for the Wassermann reaction, which became double plus after five months.

MUTILATING LEG ULCERS.

Two cases were studied by Capt. Schmitter. He concluded that:

The uniform likeness of these gangosa and leg-ulcer cases leaves no question that they are one and the same disease. Between the two there are no distinguishing features, but on the contrary they have the following essentials in common:

1. History of previous lesion analagous to chancre or primary yaw.[1]
2. Positive Wassermann reaction.
3. Moderatively positive luetin test.
4. Same type of treponemata in ulcer margins.
5. Similar results of monkey and rabbit inoculations.
6. Therapeutic results. The healing seemed much more prompt than could be secured in similarly extensive lesions of syphilis.

Having concluded that gangosa and these leg ulcers are the same treponematous disease we are still confronted with the question: Are they syphilis, yaws, or a third clinical entity? The disposition to attack the shins and nose is strikingly like some cases of syphilis. The history in each of the above four cases was of an extra-genital papule without secondaries. None of them showed any of the round discrete scars which follow ulcerative yaws. They therefore resemble mostly papular yaws, sometimes called by the hybrid name of "syphilitic yaws."

YAWS.

Four cases of yaws were also studied by him. He found that—

The treponema of yaws is usually recognized by the fineness of the organism and the lack of induration in an inoculated testis of a rabbit, yet experiment X showed a

[1] While the previous histories of these patients are notoriously unreliable, this point is recorded for what it is worth.

syphilitic treponema as fine as those in ulcerative yaws producing a positive Wassermann and not any induration in a rabbit's testis. Thus while ulcerative yaws appears clinically somewhat different from syphilis, these morphological and experimental findings fail to distinguish them. Papular yaws moreover so closely resembles syphilis that it would readily pass for such outside of the Tropics. The one case mentioned above had treponemata of medium thickness, the same as the gangosa and leg ulcer cases, which were definitely thicker than the treponemata in the three cases of ulcerative yaws, which were uniformly very fine.

According to the present state of our knowledge there seem to be different strains of the organism of syphilis and different strains of the organism of yaws between which is no line of demarcation, the difference between them being about on a par with the difference between the strains of typhoid and paratyphoid organisms.

If we admit these differences in strains, the weight of evidence in the cases observed is in favor of gangosa and leg ulcers of the type mentioned being due to the strain which causes papular or "syphilitic" yaws.

SPRUE.

A patient with sprue being treated by Maj. Ashburn was found to have entameba hystolitica in his stools. He was given emetine hydrochloride for the entamebiasis, and following it his sprue symptoms improved with the disappearance of the entameba.

These facts suggested to Capt. Schmitter the use of emetine hydrochloride for sprue which was tried in the six cases. He states that—

In all of these cases the soreness of the tongue and mouth either cleared up or was improved. All of them had complained of a feeling of tension across the upper abdomen which they usually volunteered to say was relieved soon after the emetine treatment began. The objection to the treatment is the increased activity of the bowel which it causes, but that is only temporary and trivial in comparison with the general improvement. In the first three cases treated the emetine was dissolved by the aid of hydrochloric acid and given intramuscularly. The results in these cases seemed more prompt and definite than in the latter three cases which were treated with hypodermic injections of emetine hydrochloride purchased in the market.

LEPROSY.

Twenty-five patients with leprosy who volunteered their services were studied by Capt. Schmitter clinically and microscopically, and treated experimentally with salvarsan, followed by the mixed treatment (bichloride of mercury 6 mgms. and potassium iodidum 5 gms., daily) to determine, if possible, the relationship of this disease to a treponematous infection. These cases were put through the following routine:

1. Examination for clinical signs of leprosy.
2. Search for leprosy organism.
3. Examination for suggestion of treponematous disease, syphilis or yaws.
4. Wassermann reaction.
5. Luetin reaction.
6. Antisyphilitic treatment.
7. Observation of results of treatment.

As to the result of the treatment he found that—

All of the patients professed to feel better, but allowance should be made for probable psychic effect. The macular cases showed little or no improvement. However, it was gratifying to note several complaining of itching in previously anesthetic areas. The tubercular and ulcerative cases did best. The nodules usually became more flat and the ulcers usually healed, although in some cases smaller new ones developed while under treatment. While in no case of leprosy was there a cure or apparent likelihood of cure, the marked improvement of some warrants further trial of this treatment. These cases were all observed for about two months when the observations were terminated by the patients being transferred to the leper colony at Culion Island. Persistence in the treatment for a longer period might accomplish more.

Relative to the Wassermann reactions and luetin tests in these cases he concluded as follows:

When the Wassermann reaction was new a number of clinical conditions were found which were supposed to cause a positive reaction. Careful investigation has shown most such cases to be due to the complication of latent syphilis. Each year the evidence is becoming more convincing that a positive Wassermann means only treponematous infection, the strongest apparent exception to the rule of leprosy which has frequently been reported as causing a positive Wassermann. In my series of 25 cases 2 were doubtful as to leprosy, hence I had Wassermanns on 2 other cases. Both were ++ and consequently my figures were not changed. The findings in my cases were as follows:

++ 15 or 60 per cent.
+ 5 or 20 per cent.
+− 4 or 16 per cent.
− 1 or 4 per cent.

These figures show a higher percentage of positive reactions than I have found in known cases of syphilis.

The luetin reaction was performed in all cases with the following results:

++ 3 or 12 per cent.
+ 12 or 48 per cent.
+− 7 or 28 per cent.
− 3 or 12 per cent.

These reactions are not as positive as we would expect in so many cases of syphilis. It seems reasonable to suppose that most of them are due to a group reaction of some other treponema than that used in luetin.

Combining the Wassermann and luetin reactions, we have positive ++ or + reactions from one or the other in 24 out of the 25 cases, and the twenty-fifth case had two doses of salvarsan seven months previously, when the disease began on his pubis following intercourse. Thus in 100 per cent of my 25 cases there is a fair suggestion of a treponematous factor in causing leprosy.

Hence it seems a rational theory to hold that leprosy is due to combined infection of Hansen's bacillus and a treponema. However, search for treponemata in such cases have thus far been negative. In one case a clean nodule was excised and examined for treponemata by both the dark-field illuminator and Levaditi's method, both being found negative.

Unsuccessful attempts have been made to grow Hansen's bacillus on the usual media for treponemata and also in the blood serum of a patient with secondary syphilis and a positive reaction.

THE TRANSMISSIBILITY OF MULTIPLE SCLEROSIS.

Published findings have been of interest in the light of a case which I had observed in which a mother developed progressive muscular atrophy while caring for her daughter who had multiple sclerosis. The mother's spinal fluid showed numerous fine bacilli which failed to grow on any of the ordinary media, either aerobically or anaerobically. She had marked fibrillation of the muscles which stopped after the administration of urotropin, presumably due to its antiseptic effect on the spinal canal. In view of the above experience, spinal fluid from the following three cases was tried on rabbits:

Case I.—*Multiple sclerosis.*—The patient was a Moro woman in the Philippine general hospital. She had scanning speech, difficulty in walking, ankle clonus, tremor and nystagmus. Wasserman reaction: Negative. Spinal fluid showed 70 cells per cubic millimeter. Four c. c. spinal fluid was injected into the lumbar region of a rabbit's spinal canal. The hind legs became immediately paralyzed, and he died in eight days, evidently the result of the injury.

Five c. c. of the same spinal fluid was injected into the spinal canal of a female rabbit. She had a temporary paralysis of the hind legs from which she recovered and remains well.

Case II.—*Spastic paralysis.*—The patient was a Filipino at the Philippine general hospital. His Wassermann reaction was +. He had exaggerated knee jerks, spastic gait, incontinence of urine, and ankle clonus. His spinal fluid showed a cell count of 10 to each cubic millimeter. Three c. c. of his spinal fluid was injected into the lumbar spinal canal of a rabbit. A paralysis of the left hind leg followed the injection. He recovered from this and four weeks later developed a paralysis of both hind legs, and in the seventh week the paralysis extended to the fore legs. The Wassermann reaction on the rabbit's blood serum and spinal fluid were negative.

CASE III.—*Paralysis of both legs probably due to multiple neuritis.*—The patient was a Philippine Scout. His Wassermann reaction was negative. Spinal fluid showed a cell count of two to a cubic millimeter. Five c. c. of spinal fluid were injected subcutaneously into a rabbit with entirely negative results.

These results are quite indefinite, hence the question should be further investigated when opportunity affords.

Pyosis Mansoni (*Castellani*).—(Syn.: Pemphigus contagiosus (Manson)).—The patient was a cook, hence exposed to unusual temperature. He developed an impetiginous condition of axillae, neck and face. Smears from the pus showed diplococci. Cultivated, they grew as a lemon-colored staphylococcus on agar. In bouillon they appeared mostly as diplococci but sometimes as short chains. They resembled the gonococcus in shape but were Gram positive. In addition to the skin lesion the patient had fever, loss of appetite, and coated tongue. A blood culture showed the same organism as found in the pus. Under local treatment with sulphur and salicylic ointment the patient recovered in a week.

Similar cultures were obtained from the pustules scattered over the body of a Filipino baby whose death could not be accounted for by any other cause than this infection.

TROPICAL DISEASE BOARD—PORTO RICO.

By paragraph 13, Special Orders 130, War Department, June 5, 1913, Maj. Bailey K. Ashford was relieved from military duty in Porto Rico and directed to make a special study of such diseases as are found to exist there. He associated himself with the technical commission of the Institute of Tropical Medicine and Hygiene of Porto Rico. This institute was established by an act of the legislature and supported by an annual appropriation.

The plan of the work of the institute as at first drawn up consisted of—

First. Cooperation with the director of sanitation in founding a school for sanitary inspectors.

Second. In conducting an expedition into the interior for the purpose of combating uncinariasis and for research in tropical medicine.

Third. For the working out of problems presented and material gathered during this expedition and the writing of a report embodying our findings.

The course of the school consisted of a series of 20 lectures upon sanitary subjects. Maj. Ashford lectured upon hygiene and preventive medicine. During this course, and for two months thereafter, preparations were being made for the expedition of the Institute into the interior. Maj. Ashford reported that—

Originally the plan of the institute for the work to be accomplished during its expedition comprised:

First. Research.

Second. The establishment of a rural ambulant medical service.

Third. The education of both planter and peon in the elementary hygiene and the sanitation of a home and estate.

TRANSPORTS.

SANITARY CONDITIONS.

The sanitary condition of the various transports and the accommodation provided for troops on them has been in the main satisfactory, and the majority of the sanitary faults which have existed or have arisen from time to time have been corrected. No important changes of any kind were made during the year. The remodeling of the *Dix*, which was mentioned in the last report as being so important, has not yet been undertaken.

The various infectious diseases continue to appear from time to time on the various transports. However, no epidemics of any importance occurred. There were two cases of cerebrospinal meningitis on the *Sheridan* in January, and one case, an ordinary seaman, on the *Thomas* in August. Inspectors note the appearance of these diseases in their reports, and recommendations have been made by them to quarantine before sailing all who have been exposed to these diseases until the period of incubation is past. This office has pointed out that the quarantining of even small bodies of unassigned recruits at their depots is by no means a simple task, involving as it does separate messing arrangements and sleeping arrangements for them, and their exclusion from the post exchange, reading rooms, gymnasium, baths, water closets, and all other places where they come in contact with others of the command. In the cases of regiments and battalions under orders for the Philippines, such a quarantine is both impracticable and futile; the only available step being the exclusion from contact with them of all cases of contagious diseases, which is now required by the regulations of the Medical Department.

Troops are also required by paragraph 194 of the Army Transport Regulations to be examined critically by a medical officer before leaving the posts in order to exclude all cases of contagious diseases. This, however, does not reach men in the period of incubation of infectious diseases, although a number of these are picked up at the port of embarkation before going on board the ship.

Periods of quarantines of large commands for the detection of cases of contagious diseases having long periods of incubation, such as mumps, measles, and smallpox, are most unsatisfactory where they have to embark on fixed dates, because new cases are liable to occur and prolong still further the expiration of the period of 21 days of freedom from a case of the disease. The enormous expense and inconvenience of holding a large command for indefinite periods and at the same time holding a transport in readiness to receive them can be well appreciated. It has compelled the sanitary department of the Army to accept the point of view adopted by the sanitary authorities in civil life and limit the efforts to control these diseases to segregation of recognized cases and sometimes their more intimate contacts also. To go further than the department already does in limiting the movement of troops that may have been exposed to contagious or infectious diseases would be impracticable. It is not believed that the restrictions among civilians relative to those exposed to contagious diseases are any more far-reaching than the restrictions governing in military life.

GENERAL HOSPITALS.

LETTERMAN GENERAL HOSPITAL, SAN FRANCISCO, CAL.

This hospital is used as a base hospital for the Philippines and Hawaii; a post hospital for the Presidio, San Francisco, Fort Winfield Scott, and several smaller posts in the harbor of San Francisco, and a general hospital for the western part of the country. It is the largest general hospital in the Army.

During the year a new hydro-therapeutic ward, a disinfecting and sterilizing plant, the first building of the nurses' dormitory, and an addition to the detention ward were completed. These structures are all of reinforced concrete. The commanding officer is of the opinion that in the future all new construction should be of this material, and that the older buildings should ultimately be replaced by new units thus built. He states that the following new buildings are needed: A garage, a storehouse for combustibles, a storehouse for medical property, the two remaining buildings of the nurses' dormitory, a double set of officers' quarters, a stable, and a workshop.

The medical and surgical work of the year was as heretofore of high class. It is of interest to note that only two cases of typhoid fever were admitted during the year. One of these cases was the wife of an officer, and the other one a member of the National Guard of California. Neither of them had received the typhoid prophylactic. The commanding officer states that the dental work desired for those entitled thereto has been greater in amount than could be done by the limited personnel, and that it has been necessary to give preference to officers and enlisted men in making appointments for this work, so that it has been possible to do but little for families.

The number of patients admitted during the year, including civilians and general prisoners, was 2,783. This was a decrease of 234 from the preceding year, the difference 234 being exactly the number by which the admissions for venereal diseases were reduced. There were 246 cases remaining in hospital December 31, 1912, making a grand total of 3,029 patients treated in this hospital during the year. Some of these patients were treated for more than one cause, and in the hospital tabulation more than one case was counted for such patients. The total cases treated were 3,209. Of this number of cases 119 were officers, 2,366 enlisted men, 665 civilians, and 59 general prisoners. There were 1,549 medical cases, 1,168 surgical, 125 venereal, and 167 mental. The daily average number of patients was 229. Of this number 11.4 were officers, 185.3 enlisted men, 27.6 civilians, and 4.7 general prisoners. The average number of days in hospital for each case was as follows:

	Officers.	Enlisted men.	General prisoners.	Civilians.	
				Male.	Female.
Medical	34.27	23.17	14.81	24.70	12.86
Surgical	35.14	26.06	11.16	12.19	12.40
Venereal	30.00	31.56	31.00	11.64	.....
Mental	85.00	71.81	80.07	85.50	71.00

The following tables show the movement of the sick, together with the principal sources of admission, during the calendar year 1913, civilians and general prisoners being included:

Admissions.

	Officers and enlisted men.	General prisoners.	Civilians.	Total.
Command	114	2	29	145
Transfer	1,980	51	22	2,053
Otherwise	70	.....	515	585
Remaining 1912	217	4	25	246
Total	2,381	57	591	3,029

Dispositions.

	Officers and enlisted men.	General prisoners.	Civilians.	Total.
Duty	1,607	42	27	1,676
Died	25	1	27	53
Discharged for disability	353	.....	.....	353
Deserted	5	.....	.....	5
Discharged, expiration term	28	1	.....	29
Transferred to Government Hospital for the Insane	12	2	1	15
Transferred to Fort Bayard, N. Mex	83	.....	.....	83
Transferred to other hospitals	16	2	.....	18
Otherwise disposed of	63	4	520	587
Remaining 1913	189	5	16	210

There were 38 deaths during the year among those on sick report, the causes being as follows:

Diseases of the nervous system	5
Diseases of the circulatory system	4
Diseases of the respiratory system	3
Diseases of the digestive system	1
Tuberculosis	6
Nephritis	5
Carcinoma	2
Peritonitis	3
Other causes	9

Of the patients dying, 15 were officers and enlisted men, and 23 were civilians.

There were 353 discharged on certificate of disability. Of this number 246 were not in line of duty, and 107 in line of duty. The causes were as follows:

General diseases	101
Diseases of the nervous system and organs of special sense	126
Diseases of the circulatory and respiratory systems	20
Diseases of the digestive system	8
Diseases of the genito-urinary system (nonvenereal)	13
Diseases of the bones and organs of locomotion	64
Condition due to external causes or violence	13
Other causes	8
Total	353

The largest number of discharges for any one cause was 34 for dementia precox. There were 27 for gonorrheal urethritis; 25 for "weak foot," and 19 for pulmonary tuberculosis.

The following is a statement of the admissions and dispositions of insane patients during the year:

Movements of the insane.

	Enlisted men.	General prisoners.	Civilians.	Total.
Returned to duty	3	2	.....	5
Left hospital	.....	.....	3	3
Died	.....	.....	1	1
Transferred to recruiting officers for disposition	27	2	.....	29
Transferred to Government Hospital for Insane	12	2	1	15
Transferred to other hospitals	.....	3	.....	3
Sent to their homes	4	2	.....	6
Discharged on certificate of disability at this hospital	69	.....	.....	69
Total	115	11	5	131

An active surgical clinic is maintained at this hospital, the following being a condensed tabular statement of the surgical operations:

Operations.

	Officers.	Enlisted men.	Total.	Retired officers.	Retired enlisted men.	Accepted recruits.	General prisoners.	Army Nurse Corps.	Civilians.	Grand total.
Cranium	1	0	1	0	0	0	0	0	0	1
Eye	1	23	24	0	0	0	0	0	3	27
Ear	0	1	1	0	0	0	0	0	5	6
Nose	4	31	35	0	0	0	0	0	7	42
Throat	11	45	56	0	0	0	0	1	142	199
Face	0	1	1	0	0	0	0	0	3	4
Neck	2	6	8	0	0	0	0	0	3	11
Upper extremity	1	20	21	1	0	0	0	0	6	28
Thorax	0	0	0	0	0	0	0	0	2	2
Abdomen (laparotomy)	8	72	80	0	1	0	5	1	35	122
Gynecological:										
External	.....	.....	.....	.....	.....	.....	.....	1	57	58
Internal	.....	.....	.....	.....	.....	.....	.....	0	33	33
Lower extremity	6	51	57	0	0	0	0	1	6	64
Major (not included above)	0	1	1	0	0	0	0	0	2	3
Minor (not included above)	3	63	66	2	1	0	0	0	29	98
Obstetrical	.....	.....	.....	.....	.....	.....	.....	.....	18	18
Total	37	314	351	3	2	0	5	4	351	716

Included in this list are 66 operations for appendicitis, 42 for hernia, 29 for hemorrhoids, and 32 for endometritis. In the gynecological department 61 women were delivered at term, and there were four stillbirths. Two of the stillbirths followed Caesarian section, and one was an acephalic monster.

Of the operations performed, five were reported as partially successful, five as failures, and three were followed by death. The cases in which deaths occurred were peritonitis (acute), two, and abscess of the liver, one.

The following is a statement of the work done in the eye, ear, nose, and throat clinic:

	Hospital cases.	Out cases.	Total.
Officers and enlisted men	561	359	920
Families of officers and enlisted men	114	246	360
Civilian employees	32	36	68
Families of civilian employees	8	13	21
Army nurses	2	15	17
Examination of Army nurses	0	48	48
Civil War veterans	12	16	28
Total	729	733	1,462

A large department laboratory is maintained for the use of the hospital, and for the special work of the posts in the Western Department. The report of the work done will be found under the general head of "Laboratories," page 151.

The mean strength of the personnel on duty at this hospital for the year was: Officers, 12; Army Nurse Corps, 44; Hospital Corps, 158.

There were 25 civilians employed by the Medical Department and 14 by the Quartermaster Corps on duty in the hospital during the year.

WALTER REED GENERAL HOSPITAL.

This is the general hospital at Washington, D. C., and also serves as post hospital for Washington Barracks, D. C., an autoambulance conveying the patients from the post at sick call and answering emergency calls.

Since the last annual report the contagious disease hospital, an additional ward to the hospital, and a hydrotherapeutic plant have been completed. In addition there have been a number of minor improvements and additions. The planting and seeding program whereby the appearance of the grounds will be improved from year to year, as funds become available, has been continued. There are only two sets of officers' quarters. The commanding officer is of the opinion that the Government would be far better and more economically served by building quarters for all officers on duty there.

The number of cases admitted during the year, including retired officers, retired and discharged enlisted men, and civilians, was 817, this being an increase of 130 over the preceding year. Of this number, 139 were officers, 456 enlisted men, 26 retired officers, 38 retired and discharged enlisted men, 153 civilians, and 5 members of the Army Nurse Corps. Three hundred and thirty-seven of these cases were medical and 480 surgical. There were 64 cases remaining on sick report December 31, 1912, making a total of 881 treated during the year. The daily average number of patients was as follows: Officers, 14.48; enlisted men, 57.86; retired officers, 1.85; retired and discharged soldiers, 2.31; Army Nurse Corps 0.28; and civilians, 8.65; total, 85.43.

The following table shows the movement of the sick, together with the principal causes of admission, during the calendar year 1913, civilians being included:

Remaining on sick report Dec. 31, 1912	64
Admissions:	
For gunshot wounds	5
For diarrhea and dysentery	4
For malarial fevers	13
For typhoid fever	0
For rheumatic affections	9
For venereal diseases	60
For injuries	81
For insanity	18
For alcoholism	10
For all other causes	617
Total admissions during the year	817
Total admissions to be accounted for	881
Dispositions:	
Total returned to duty	409
Discharged for disability	82
Discharged per expiration of term	8
Deaths from all causes	19
Deserted	0
Transferred to other general hospitals	16
Otherwise disposed of	287
Total	821
Remaining on sick report Dec. 31, 1913	60
Total	881

There were 19 deaths. Of this number, 1 was an officer, 5 were enlisted men, 4 retired officers, 4 retired soldiers, and 5 civilians. The following were the causes of the deaths:

Carcinoma	4
Diabetes mellitus	1
Pulmonary tuberculosis	1
Sarcoma	1
Gunshot wound (cranium)	1
Nephritis	3
Mitral insufficiency	2
Chronic myocarditis	3
Senility	1
Appendicitis	1
Bronchial pneumonia	1

There were 82 men discharged on certificate of disability. The causes were:

General diseases	16
Diseases of the nervous system and organs of special sense	28
Diseases of the circulatory system	9
Diseases of the digestive system	1
Diseases of the genito-urinary system (nonvenereal)	4
Diseases of the bones and organs of locomotion	11
Conditions due to external causes or violence	11
Other causes	2

An active surgical clinic is maintained at this hospital. The following is a statement of surgical conditions for which operations were performed:

Hernia	10	Gynecological	25
Appendicitis	52	Diseases of the eye	4
Liver abscess	1	Diseases of the ear	1
Cholecystitis	2	Diseases of the nose	29
Cholelithiasis	1	Diseases of the mouth and pharynx	74
Pyonephrosis	1	Diseases of the neck and thorax	1
Intestinal obstruction	1	Other diseases of the abdomen not specified above	5
Psoas abscess	1	Other diseases of the genito-urinary system, not specified above	2
Duodenal ulcer	2	Other diseases of the anus and rectum, not specified above	5
Renal calculus	2	Other diseases of the skin and cellular tissue, not specified above	12
Hemorrhoids	9	Other diseases of the bones and organs of locomotion	10
Fistula in ano	4	Other	2
Phimosis	9		
Varicocele	9		
Adenitis	4		
Fibrous ankylosis joint	2		
Fractures	12		
Tumors	7		

The following is a statement of the work done in the laboratory during the year:

Examinations of—	
Urine	4,324
Blood	757
Sputum	721
Feces	483
Stomach contents	34
Urethral discharges	581
Miscellaneous examinations	103
Total	7,003

The average number of medical officers on duty during the year was 8, enlisted men 79, and Army Nurse Corps 21.

GENERAL HOSPITAL, FORT BAYARD, N. MEX.

This hospital is for the treatment of cases of pulmonary tuberculosis in the Army. Fort Bayard is situated in the southwestern part of New Mexico; the reservation originally extended about 4 miles north and south and 3 miles east and west, and had an area of approximately 13½ square miles. Several years ago it was enlarged by the purchase of land to the north and by the addition, through Executive order, of various tracts of public land, the object of the enlargement being the more perfect protection of the watershed and the acquisition of additional water. On the north the land rises rapidly, reaching the height of 9,000 feet at Black Peak, about 8 miles from the post. In this direction the surface is broken by rocky hills covered with pinon, juniper, and western yellow-pine trees. The country is picturesque, and fine views are to be had from the hills. To the south the valleys widen into vast treeless plains. The feature which constitutes the peculiar excellence of the climate at Fort Bayard and distinguishes it from other parts of the Rocky Mountain Plateau is its relative equability. The climate is such that outdoor life is pleasant throughout the year. Two factors contribute to secure this result—the altitude and the geographical position. The altitude, 6,165 feet, prevents excessive heat; the hot plains of a lower elevation, which surround on all sides the mountainous region in which Fort Bayard

is situated, temper the cold winds of winter and prevent excessive cold.

No new buildings were constructed during the year. An additional silo at the dairy was erected at the expense of the hospital fund. A small dam was constructed on a creek with the hope of being able to utilize storm water for irrigation of the field north of the post. The commanding officer states that—

> The dairy herd has increased so rapidly that it has now become necessary to take steps to diminish its size. The herd has been repeatedly tested by tuberculin and all animals that reacted have been killed, as well as a few of the older cows, negative to tuberculin, which were in poor condition. It is now proposed with the authority of the Surgeon General to sell a considerable number of the young heifers and the less valuable cows.
>
> The net profit arising from beef and pork produced during the present winter amounts to about $3,500. Not only is there a considerable profit by raising beef cattle and hogs, but also the meat thus obtained is of a much superior quality to that which can be obtained by purchase.

It is reported that the buildings devoted to ambulant patients have been overcrowded during the winter. The recommendation is renewed by the commanding officer that another ward be built in the location now occupied by wards 5 and 6. He also recommends that a fireproof vault be constructed in the cellar of the administration building for the storage of records.

The number admitted during the year including beneficiaries of the Soldiers' Home, civilians and general prisoners, was 766, this being an increase of 80 over the preceding year. There were 291 patients remaining December 31, 1912, making a total of 1,057 cases treated during the year. Of this number, 35 were officers, 478 enlisted men, 481 beneficiaries of the Soldiers' Home, and 63 civilians. Of the number treated, 991 were medical cases and 66 were surgical. The daily average of officers was 11.29; enlisted men 108.02; beneficiaries of the Soldiers' Home, 123.89; civilians, 13.44; total, 256.64.

The following tables show the movement of the sick during the year, with the principal causes of admission and disposition:

	Officers, enlisted men, and civilians.	Beneficiaries of the Soldiers' Home.	Total.
ADMISSIONS.			
Tuberculosis	259	331	590
Venereal diseases	4	.....	4
Alcoholism	8	.....	8
Hemorrhoids	2	.....	2
Injuries	25	.....	25
Bronchitis	3	.....	3
Sprue	1	.....	1
Appendicitis	7	.....	7
Rheumatism	3	.....	3
Bronchiectasis	1	.....	1
Psoas abscess	1	.....	1
Hernia	1	.....	1
Empyema	2	.....	2
Periostitis	1	.....	1
Abortion	2	.....	2
Bronchial asthma	1	.....	1
Cholangitis	1	.....	1
Peritonitis	1	.....	1
Septicemia	1	.....	1
Tuberculosis in which diagnosis was not confirmed	9	.....	9
Other causes	102	.....	102
Total admissions in 1913	435	331	766
Remaining Dec. 31, 1912	141	150	291
Total to be accounted for	576	481	1,057

	Officers, enlisted men, and civilians.	Beneficiaries of the Soldiers' Home.	Total.
DISPOSITIONS.			
Returned to duty	217		217
Died	32	40	72
Discharged for disability	140		140
Discharged by expiration of term of service	3		3
Otherwise disposed of	45	284	329
Transferred to other hospitals	1		1
Total dispositions in 1913	338	324	662
Remaining Dec. 31, 1913	238	157	395
Total accounted for	576	481	1,057

Seventy-five deaths occurred during the year. Of this number, 2 were officers, 22 enlisted men, 40 beneficiaries of the Soldiers' Home, and 11 civilians. Chronic pulmonary tuberculosis caused 50 deaths, lobar pneumonia 5, tuberculous peritonitis 4, tuberculous meningitis 3, and several other diseases 1 each.

The following is a statement of discharges from the Army, with causes, of enlisted patients:

By expiration of term of service	3
By sentence of court-martial	1
By purchase	1
For disability:	
Pulmonary tuberculosis	133
Syphilis	1
Chronic bronchitis	2
Neurasthenia	1
Aortic aneurism	1
Cerebrospinal sclerosis	1
Tumor of lung	1
Total	145

One hundred and seven surgical operations were performed during the year, of which number 105 were successful. There were two deaths following operation. One of the deaths occurred from anuria on the seventh day following operation, the other death occurred in a case of peritonitis following appendicitis.

The following is a condensed statement of the surgical condition for which operations were performed:

Diseases:		Diseases—Continued:	
Eye	20	Nervous system	2
Mouth and pharynx	9	Skin and cellular tissue	2
Neck and thorax	16	Lymphatic system	9
Abdomen	12	Bones	8
Anus and rectum	10	Tumors	7
Genito-urinary system	12		

The laboratory work of the year may be itemized, as follows:

Examinations of sputum	7,237	Miscellaneous examinations	118
Examinations of urine	847	Autopsies, human	6
Examinations of blood	165	Autopsies, bovine	35
Wassermann's tests	165	Histological examinations	938
Tuberculin tests, bovine	38	Others	567
X-ray examinations and photography	509		

The number of completed cases of pulmonary tuberculosis in 1913 was 429. Important complications were present in 197 cases, as follows:

Adenitis, tuberculous	5	Pleurisy, with effusion	4
Asthma	6	Prostatitis, tuberculous	2
Arthritis deformans	2	Peritonitis, tuberculous	4
Cystitis, tuberculous	2	Pneumonia, lobar	3
Enteritis, tuberculous	14	Pneumothorax, spontaneous	3
Empyema	2	Syphilis	31
Epididymitis, tuberculous	2	Pott's disease, tropical sprue, appendicitis, cholelithiasis, amebic dysentery, hydronephrosis, pyonephrosis, hemorrhagic hypernephritis, pulmonary carcinoma (each)	1
Fistula in ano, tuberculous	5		
Laryngitis, tuberculous	68		
Meningitis, tuberculous	4		
Nephritis	9		
Otitis, media, chronic, purulent	22		

The following table shows the result of treatment in all cases of pulmonary tuberculosis:

Class.	Number.	Apparently cured.		Arrested.		Improved.		Unimproved.		Died.	
		Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.
Incipient	114	23	20.17	47	41.22	35	30.70	9	7.89	0	0
Moderately advanced	239	24	10.04	49	20.50	134	36.06	24	10.04	8	3.34
Far advanced	366	7	1.91	9	2.45	175	47.81	117	31.96	58	15.84
Acute miliary	3	0	0	0	0	0	0	2	66.66	1	33.33
Total	[1] 722	54	7.47	105	14.54	344	47.64	152	21.05	67	9.27

[1] Includes 40 completed cases under treatment 1 month or less and 16 cases admitted during December, 1913, and remaining Dec. 31, 1913.

The result of treatment in completed cases of pulmonary tuberculosis was as follows:

Class.	Number.	Apparently cured.		Arrested.		Improved.		Unimproved.		Died.	
		Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.
Incipient	95	19	20.00	39	41.05	29	30.52	8	8.42	0	.....
Moderately advanced	115	6	5.21	22	19.13	61	53.04	18	15.65	8	6.95
Far advanced	218	3	1.37	5	2.29	93	42.66	59	27.06	58	26.60
Acute miliary	1	.....	.....	.....	.....	.....	.....	.....	.....	1	100.00
Total	[1] 429	28	6.52	66	15.38	183	42.65	85	19.81	67	15.61

[1] Includes 40 cases under treatment 1 month or less.

The mean strength of the personnel on duty during 1913 was as follows:

Medical officers (including 2 under treatment for tuberculosis)	9.5
Other officers (including 2 officer patients on light duty)	2.8
Hospital Corps (not including 4.15 per cent under treatment for tuberculosis)	113.5
Post noncommissioned staff (quartermaster sergeants, Quartermaster Corps)	2.26
Quartermaster Corps	17.83
Army Nurse Corps	20.43
Hospital Corps, members of the command, but under treatment for tuberculosis, and not on any duty	4.91

ARMY AND NAVY GENERAL HOSPITAL, HOT SPRINGS, ARK.

This hospital is intended especially for patients having diseases in which hydrotherapeutic treatment is indicated. Paragraph 1463, Army Regulations, 1910, states that—

> The Army and Navy General Hospital, Hot Springs, Ark., is under the direction of the Secretary of War, and is devoted to the treatment of the officers and enlisted men of the military and naval service of the United States, cadets at the United States Military and Naval Academies, officers of the Revenue-Cutter Service, officers of the Public Health and Marine-Hospital Service, and honorably discharged soldiers and sailors of the Regular and Volunteer Army and Navy of the United States, for such diseases as the waters of the hot springs of Arkansas have an established reputation in benefiting.

The building for the nurses' quarters was completed during the year. In addition to this construction there were a number of minor additions and repairs made. A new mess has been started on the second floor of the administration building for the officer patients, utilizing a portion of the porch for a kitchen and one of the rooms as a dining room. All diets for officer patients are prepared and served here. Formerly those on full diet had to be subsisted outside of the hospital. The commanding officer states that a new ward for officers, quarters for two noncommissioned officers, barracks for the Hospital Corps and Quartermaster Corps, and a new hot-water reservoir are urgently needed.

During the year 858 cases were admitted, this being an increase of 43 over the preceding year. Of this number 35 were officers, 145 enlisted men, 7 retired officers, 19 retired enlisted men, and 652 civilians, chiefly veterans of the Civil War, admitted in accordance with the law. The daily average was 100.29. The following tables show the principal causes of admission and method of disposition of all cases:

Remaining in hospital Dec. 31, 1912	102
Admissions:	
Alcoholism	8
Diseases of the respiratory system	13
Diseases of the heart	22
Diseases of the urinary system	25
Dysentery	1
Myalgia	4
Rheumatism, articular	110
Rheumatism, muscular	15
Sprains and muscular strains	1
Gastritis	3
Hernia, inguinal	5
Appendicitis	2
Diseases of the kidneys	9
Arthritis	36
Syphilis and results	51
Gonorrhea and results	16
Carcinoma of esophagus	1
Diseases of the circulatory system	213
Malarial affections	25
Pulmonary tuberculosis	2
All other causes	296
Total	960

Dispositions:	
Returned to duty	117
Died	12
Discharged on certificate of disability	43
Transferred	3
Discharged from hospital (civilians)	694
Otherwise disposed of	4
Remaining Dec. 31, 1913	87
Total	960

DEATHS.

Twelve deaths occurred during the year, including two enlisted men on the active list of the Army, from the following causes:

Civilians:	
Nephritis, interstitial, chronic, acute exacerbation	3
Shock and suppression of urine following operation for supra-pubic prostatectomy	1
Myocarditis, subacute	1
Myocarditis, chronic, with dilation	1
Pistol wound of skull, self inflicted with suicidal intent	1
Pyelitis, chronic	1
Gastritis, acute	1
Pulmonary tuberculosis	1
Total	10
Soldiers:	
Asthenia, general; acute, diffuse tuberculosis of tongue and soft palate and cervical lymph nodes	1
Ruptured sacular aneurism of thoracic aorta, opposite fifth dorsal vertebra	1
Total	2

There were 43 discharges on certificate of disability. The following is a list of the causes:

Pes planus, bilateral	8
Epilepsy, grand mal	5
Defective mentality	3
Nephritis	2
Diseases of the circulatory system	3
Diseases of the nervous system	3
Others	19
Total	43

The number of operations has shown an increase over that of the foregoing year. Almost all of the surgical work is done on the ex-soldiers and volunteers, for very little, if any, work of an operative nature is sent to this hospital by transfer. The operating room has been equipped with many new instruments and appliances for general surgery, as well as for eye, ear, nose, and throat work. The following is a résumé of the surgical conditions for which work was done during 1913:

Hypertrophied prostate, senile	5
Cellulitis	7
Hydrocele	6
Vesical calculus	2
Hernia	3

Hemorrhoids	3
Appendicitis	3
Diseases of the nose and throat	8
Others	22
Total	59

The following is an abstract of the laboratory work done during the year 1913:

Wassermanns	424
Blood examinations	82
Feces	15
Urethral smears	12
Tissues, sectional	12
Bacteriological examinations	11
Milk examinations (bacteriological and fat determination)	3
Stomach analysis	12
Phenolsulphonphthalein test for renal efficiency	13
Sputa	11
Autopsies	9
Urine	2,529
Widals	4
Total	3,137

The mean daily strength of the personnel on duty during the year was as follows:

Medical officers	3.33
Other officers	0.00
Post noncommissioned staff	1.00
Hospital Corps	53.85
Army Nurse Corps	5.26
Aggregate	63.43

DEPARTMENT HOSPITAL, MANILA, P. I.

This hospital is the general hospital for the Philippine Islands. It differs from the general hospitals in this country in that it is not directly under the control of the Surgeon General, but owing to its geographic location it is under the authority of the department commander.

The new construction mentioned in the last report has been completed. During the year there was no other construction begun, but a number of minor improvements and repairs were made.

During the year 2,165 cases were admitted. Of this number 109 were officers, 1,206 enlisted men (Americans), 261 Philippine Scouts, and 589 civilians. Of the entire number 1,568 were classed as medical cases and 597 as surgical. In addition to this number, there were 86 remaining in hospital December 31, 1912, making a grand total of 2,251 cases treated during the year. The daily average number of patients was 94.73. Of this number 5.25 were officers, 57.21 enlisted men (Americans), 11.61 Philippine Scouts, and 20.66 civilians.

The following table shows the movement of the sick together with the principal causes of admissions during the year 1913:

Admissions.

Cause.	Officers.	Enlisted men (American).	Philippine Scouts.	Civilians.
For gunshot wounds	1	9	12	2
Diarrhea and dysentery	6	14	2	9
Malarial fevers	4	83	36	32
Typhoid fever	.....	.....	.....	.....
Rheumatic affections	3	25	1	11
Venereal diseases	3	225	27	27
Injuries	10	86	24	63
Insanity	.....	53	1	.....
Alcoholism	.....	65	.....	11
All other causes	82	646	158	434
Total	109	1,206	261	589

Total admissions during the year	2,165
Remaining in hospital and quarters Dec. 31, 1912	86
Total to be accounted for	2,251

Dispositions.

	Officers.	Enlisted men (American).	Philippine Scouts.	Civilians.
Returned to duty	75	860	191	10
Discharged on certificate of disability	.....	.....	48	.....
Discharged per expiration of term	.....	.....	3	.....
Deaths, all causes	.....	8	1	7
Transferred to other hospitals	36	320	5	19
Otherwise disposed of	1	5	3	543
Total	112	1,193	254	579

Aggregate	2,138
Remaining in hospital Dec. 31, 1913	113

There was no case of typhoid fever treated in this hospital during the year. Sixteen deaths occurred as compared with 23 in 1912. The following table shows the deaths, with causes:

Cause.	Officers.	Enlisted men (American)	Philippine Scouts.	Civilians.
Abscess of the liver	.....	.....	.....	1
Cardiac dilatation	.....	2	.....	.....
Cerebrospinal meningitis	.....	.....	.....	1
Cirrhosis of the liver	.....	.....	.....	1
Ileus, acute, post operative, secondary to peritonitis	.....	.....	.....	1
Malaria, estivo-autumnal, pernicious	.....	1	.....	.....
Myelitis, acute, traumatic	.....	1	.....	.....
Malarial, toxemia	.....	1	.....	.....
Peritonitis, acute, secondary, to entamebic dysentery	.....	1	.....	.....
Retro-cecal abscess, entamebic	.....	1	.....	.....
Traumatism by crushing (vehicle)	.....	.....	.....	1
Traumatism by firearms	.....	.....	.....	1
Tuberculosis, pulmonary	.....	.....	1	.....
Tubercular toxemia	.....	1	.....	.....
Diphtheria and bronchopneumonia	.....	.....	.....	1
Total	0	8	1	7

Aggregate, all classes, 16.

American soldiers are not discharged for disability in the Philippine Islands, except in very rare cases, and there were none discharged there in 1913. All the native enlisted men physically disabled for service are discharged in the islands. The following table shows the number discharged at this hospital during the year, with causes:

Abdominal pain, post operative	1
Chronic bronchitis and heart disease	1
Dementia precox	1
Epilepsy	1
Heart disease	1
Leukemia, myeloid	1
Loss of fourth and fifth fingers, right	1
Nephritis, interstitial	1
Sclerosis of brain and spinal cord	1
Tuberculosis, pulmonary	34
Tuberculosis, pulmonary, and fecal fistula, post operative	1
Tuberculosis, pulmonary and heart disease	2
Wounded in action:	
Partial paralysis, right hand	1
Deformity and shortening of left leg	1
Total	48

In 1912 there were 45 discharged for disability at this hospital.

An active surgical clinic is maintained. The following is a condensed tabular statement of surgical operations performed during the calendar year 1913, except operations of eye, ear, nose, and throat clinic:

Operations.	Officers.	Enlisted, except Philippine Scouts.	Philippine Scouts.	Total.	Army nurse Corps.	Civilians.	Total.	Grand total.
Cranium	0	1	0	1	0	2	2	3
Face	0	3	0	3	0	2	2	5
Neck	2	2	1	5	0	1	1	6
Upper extremity	1	11	1	13	0	10	10	23
Thorax	1	2	2	5	0	6	6	11
Abdomen (laparotomy)	9	38	2	49	1	46	47	96
Lower extremity	5	26	0	31	0	16	16	47
Gynecological:								
External					0	60	60	60
Internal					1	31	32	32
Major (not included above)	2	3	0	5	0	6	6	11
Minor (not included above)	0	31	0	31	0	27	27	58
Total	20	117	6	143	2	207	209	352

Included in this list were 61 operations for appendicitis, 27 for hernia, 4 for abscess of the liver, 1 for cholecystitis, and 21 for hemorrhoids. In the eye, ear, nose, and throat department 143 operations were done. There were 52 deliveries at term in the obstetrical department, with one stillbirth.

The following is a report of the hospital laboratory work during the year:

Examination of—		Examination of—Continued.	
Blood	3,370	Wassermann reactions	2,107
Feces	2,085	Autopsies	15
Sputum	2,050	Cultures	238
Urine	3,298	Stomach contents	22
Smears	1,284	Sections	65
Water	779	Animal injection	38

The average number of medical officers on duty was 9, dental surgeons 3, Hospital Corps men 91, Army Nurse Corps 22.

DEPARTMENT HOSPITAL, HONOLULU, HAWAII.

General Orders No. 12, Headquarters Department of Hawaii, October 31, 1913, specified that—

> The hospital located on the Fort Shafter Military Reservation will be known as the department hospital.

On account of its geographical location this hospital is governed in the same way as the department hospital at Manila, P. I.

PROVIDENCE HOSPITAL.

The act approved June 23, 1913, having appropriated $19,000 for the support and medical treatment of destitute patients in the city of Washington, D. C., under a contract to be made with Providence Hospital by the Surgeon General of the Army for relief afforded, was as follows:

Patients in hospital July 1, 1913	96
Admitted during the year	1,371
Total number treated	1,467
Average number admitted per month	122
Number remaining in hospital June 30, 1914	98
Total number of days' treatment afforded	35,311
Average number of days' treatment per patient	24
Average number of patients treated per day	97
Longest term of treatment (days)	156
Shortest term of treatment (days)	1
Number of patients in hospital during the whole year	None.

LABORATORIES.

A laboratory is provided for each of the departments, the one at the Army Medical School, Washington, D. C., for the use of the Eastern Department; at Fort Leavenworth, for the Central Department; at the Letterman General Hospital, for the Western Department; and at Fort Sam Houston, for the Southern Department. The laboratory of the tropical board has been doing the special work required of a department laboratory for the Philippine Department, and one has been recently established at Honolulu in connection with the department hospital for the work in that department.

Army Medical School.

BACTERIOLOGICAL DIVISION.

No changes of importance have been made in the bacteriological laboratories during the past year. The work has been of a varied character, as shown in the following summaries:

TYPHOID FEVER PROPHYLACTIC.

Vaccine prepared in the laboratory was distributed during the six months periods, as follows:

	1913, June 30.	1913, Dec. 31.	1914, June 30.
	c. c.	c. c.	c. c.
Army	98,169	77,569	127,354
Navy	32,566	46,346	46,626
National Guard	28,031	30,801	52,011
Various Government departments	1,195	2,626	1,692
Civilians and civil institutions	454	1,108	628
Total	160,415	158,450	228,311

No changes have been made in the method of preparation of the prophylactic, since our results with the vaccine at present in use have been all that could be desired.

Miscellaneous vaccines prepared and distributed to Army posts during six months periods.

	1913		1914.
	June 30.	Dec. 31.	June 30.
	c. c.	c. c.	c. c.
Gonococcus:			
Prepared		1,300	1,622
Distributed	737	1,036	1,298
Staphylococcus:			
Prepared		950	1,063
Distributed	640	879	803
Streptococcus:			
Prepared		375	225
Distributed	28	232	145
Staphylococcus-acne:			
Prepared		200	830
Distributed		138	497
Pyorrhea:			
Prepared		125	200
Distributed		42	42
Autogenous:			
Prepared and distributed		38	30

Summary of clinical laboratory examinations of typhoid fever cases for six months periods.

	1913		1914, June 30.
	June 30.	Dec. 31.	
Examinations of typhoid cases	246	226	84
Convalescents examined:			
Positive	2	0	0
Negative	10	6	2
Suspected carriers or contacts examined:			
Positive	8	18	4
Negative	74	58	32
Widals:			
Positive	47	19	4
Negative	45	31	20
Blood cultures:			
Positive	3	3	1
Negative	37	31	15
Blood cultures from clots:			
Positive	0	1	0
Negative	18	7	8
Examination of feces for b. typhosus:			
Positive	4	0	1
Negative	73	72	18
Examination of urine for b. typhosus:			
Positive	0	0	0
Negative	30	51	14
Examination of feces for b. para-typhosus:			
Positive	0	3	0
Negative	0	2	0
Examination of feces for b. dysenteria:			
Positive	0	2	0
Negative	6	3	3
Gall bladder:			
Positive	1	0	0
Negative	1	1	0
Gall stone:			
Positive	0	0	0
Negative	1	0	0
Sputum:			
Positive	0	0	0
Negative	1	0	0

No chronic bacillus carrier was detected during the fiscal year ending June 30, 1914.

A considerable decrease will be noted in the amount of work done on typhoid and suspected typhoid cases in the past six months over that done in either of the preceding six months' periods. This decrease is another evidence of the protective value of typhoid prophylaxis.

As there are not more than four or five cases of paratyphoid fever reported yearly, it is evidently not necessary, at least in our service, to use a mixed typhoid and paratyphoid vaccine, and none has been used.

Summary of clinical laboratory examinations for six months.

	Period ending—		
	1913		1914, June 30.
	June 30.	Dec. 31.	
Blood counts:			
Red	6	23	47
White	27	37	64
Differential counts	46	31	59
Malaria	68		
Positive		6	2
Negative		42	38
Blood cultures	23		
Positive		0	0
Negative		12	5
Urinalyses	77	80	102

Summary of clinical laboratory examinations for six months—Continued.

	Period ending—		
	1913.		1914.
	June 30.	Dec 31.	June 30.
Sputa for tubercle bacilli:			
Positive	6	8	2
Negative	29	39	29
Feces for parasites, etc	57	37	45
Water, bacteriological	34	37	12
Cultures of pus, exudates, etc	121	74	65
Animal inoculations for immune sera, etc	157	248	184
Histological examinations of operative and post-mortem tissues	489	247	262
Miscellaneous examinations, gonococcus, etc	48	89	151
Wassermann examinations	2,535	2,140	5,774
Positive	559	421	377
Negative	624	512	688
Reexaminations	1,352	1,207	1,383
Tests made on survey			3,326
Examinations for treponema pallidum;			
Dark field microscope—			
Positive	8	9	18
Negative	14	12	34
Staining—			
Positive	0	0	1
Negative	0	0	0
Examinations:			
For trypanosomes	500	582	920
For coli bacilli	70		
Treatments:			
With salvarsan	12	7	2
By bacterial vaccines	246	314	193
Luetin tests	28	0	0
Spinal fluid	8		
For cell count		3	0
For Noguchi		4	4
For Noguchi, positive		1	2
Meningococcus—			
Positive		0	0
Negative		1	0
For protein—			
Positive		1	0
Negative		0	0
Coagulation time		1	0
Tuberculin tests		3	0
Examinations for diphtheria:			
Positive		3	4
Negative		20	18
Milk			5
Gonococcus fixation tests			22

REPORT UPON WASSERMANN TESTS.

The Wassermann reaction has been continuously employed as a diagnostic test for syphilis.

During the year ending June 30, 1914, the total number of Wassermann tests made in this laboratory has been 7,914, of which 2,590 were reexaminations, 3,326 made on Wassermann survey, and 1,998 examinations of new cases. Of the latter, 949 were of syphilis or suspected syphilis, and 1,049 were from cases suffering with diseases other than syphilis.

The following table shows the actual results obtained in known syphilitics:

Stage of disease.	Number of cases.	Positive.	Negative.	Per cent positive.
Primary	242	178	64	73.55
Secondary	310	285	25	91.93
Tertiary	263	227	36	86.31
Latent	114	92	22	80.70
Parasyphilis	7	3	4	42.86
Paresis	1	1	0	100.00
Spinal fluid in case of paresis	1	1	0	100.00
Locomotor ataxia	3	3	0	100.00
Not stated	8	8	0	100.00
Total	949	798	151	84.09

WASSERMANN SURVEY.

It is believed that the Wassermann reaction, as now performed in this laboratory, is as satisfactory and efficient as it can be made with the serological knowledge at present available, and that the time has come to apply this efficient instrument for the acquisition of further knowledge. Since February of this year, a series of Wassermann surveys have been undertaken for the purpose of determining, so far as is possible, the prevalence and distribution of syphilis in the Army and in the civil community. It will require at least a year more to bring this work to a satisfactory conclusion, and at the end of this time a further and detailed report will be made.

CHEMICAL DIVISION.

During the fiscal year ending June 30, 1914, 23 analyses of water from various Army posts were made in this laboratory. There were 4 examinations of women's milk and 4 of cow's milk. There were 2 intestinal concretions examined.

X-RAY LABORATORY.

In this laboratory the work done, in addition to instruction, is represented by the following table:

X-ray work:		
Radiographs made		3,876
Dental films		238
Photomicrographs		15
Photographic work:		
Lantern slides		1,484
Negatives		376
Prints		1,946
Mounting of prints		215
Moving-picture film developed	feet	1,715

It is believed that the usefulness of the school could be advantageously expanded by the assignment of more officers of the Medical Corps to the school for a special course of instruction than has been the case heretofore, and it would seem desirable, if it be feasible, to so assign a limited number for a specified period, say four months, the selection to be made from among those officers, who by reason of their stations or duties, have been unable to enjoy the opportunities for professional study afforded by other duties or stations.

The building occupied by the school is not very satisfactory. It is a rented building; is not well arranged; is noisy, being situated on a street and alley through which there is a great deal of traffic; some of the rooms are dark; and it is not in a good state of repair. Efforts have been repeatedly made to have it placed in better condition. However, it does not appear that a building better suited to the needs of the school can be obtained by renting.

It would be most desirable to have a building or buildings erected for school purposes on the Walter Reed General Hospital Reservation, where the clinical advantages of the hospital could be made use of and where the student officers could receive practical instruction in hospital administration.

Fort Leavenworth, Kans.

Owing to the changes due to official orders and the movement of troops from the Central Department to Texas, this laboratory was in charge of three different medical officers during the past year. From January 1, 1913, until January 27, 1913, First Lieut. George B. Foster was in charge; from January 29, 1913, until February 22, 1913, Capt. Clarence L. Cole, and from October 10, 1913, until the end of the calendar year Capt. Charles F. Craig. During the interim between February 22, 1913, and October 10, 1913, owing to the fact that the troops of the department were on detached service in Texas, the laboratory was not in operation. Accordingly the report actually covers only about five months' work. Capt. Craig, who rendered the report for the year, was unable to find detailed reports of the work done in the laboratory during the months of January and February, 1913, hence the figures given for the calendar year can only be considered as approximate, being compiled from the incomplete records that were available. During the month of January, 1913, approximately 454 examinations were made in the laboratory and during February about 100, so far as available records show. The total 554 have been added to the examinations made in the period between October 10, the date of the reopening of the laboratory, and December 31. The following table gives the approximate total for the calendar year 1913:

Examinations of—	
Blood, for malarial parasites	22
Erythrocyte counts	15
Leucocyte counts	25
Differential counts	12
Feces, for typhoid	2
Urine, for typhoid	1
Blood cultures, for typhoid	1
Feces, for entameba	10
Sputum, for tuberculosis	57
Urine	205
Milk, bacteriological	6
Milk, chemical	6
Water, bacteriological	15
Dark field, for *T. pallidum*	8
Throat cultures	5
Smears for gonococci	26
Antityphoid inoculations	286
Smallpox vaccinations	22
Autogenous vaccines prepared	6
Inoculations of animals	21
Miscellaneous	24
Wassermann tests	1,255
Total	2,030

Between October 10, 1913, the date when this laboratory was reopened, and March 1, 1914, even though troops were practically absent from the department, nearly 3,000 laboratory examinations were requested. This is believed to demonstrate the importance of maintaining department laboratories in operation even in the absence of troops.

Capt. Craig reports in part as follows:

Typhoid examinations.—The no less than wonderful influence of the typhoid prophylactic in preventing the disease is shown by the fact that in the time covered by this report only one request was made for the examination of the blood and feces in a suspected case of typhoid fever, and a negative result was obtained. * * *

Owing to the short time during which the laboratory was in operation prior to December 31, 1913, it has been thought best to give the results obtained with the Wassermann test from October 10, 1913, to March 1, 1914, the date of writing this report. During this time 1,451 Wassermann tests have been made, of which 1,142 were reexaminations for the purpose of controlling treatment, while 309 were new cases. Of the 309 new cases, 185 were diagnosed as syphilis, while 124 were diagnosed as suffering from some other disease. Of the 185 cases diagnosed as syphilis, 153, or 82.7 per cent, gave a positive reaction. The following table gives the result of the Wassermann test in these cases, arranged according to the stage of the disease:

Stage of syphilis.	Total.	Positive.	Negative.	Per cent positive.
Primary	49	41	8	83.6
Secondary	62	61	1	98.3
Tertiary	31	24	7	77.4
Latent	43	27	16	62.7
Total	185	153	32	82.7

The writer has continued work upon the pathogenic and harmless entameba, with special reference to the easiest and most practical method of distinguishing between the two species found in man. It is now generally accepted that there is but one pathogenic species of entameba occurring commonly within the intestine of man. *Entameba histolytica*, and that so-called *Entameba tetragena* is simply a stage in the development of *histolytica*. It is also generally accepted that there occurs commonly in the human intestine a harmless species of entameba, *Entameba coli*, and that it is of the greatest importance that the two species be differentiated before a diagnosis of entamebic dysentery is made, as it is undoubtedly true that many infections with the harmless *Entameba coli* have been diagnosed as entamebic dysentery because of finding the entamebæ in the stools, thus greatly vitiating our statistics regarding the occurrence of this disease and the results of various methods of treatment.

The writer believes that the two species are most easily differentiated in the living condition, and that, while it is well to confirm one's diagnosis by wet-fixed, hæmatoxylin-stained preparations, it is not essential to stain these parasites in order to differentiate the two species. * * *

Complement fixation in gonorrhea.—Some work has been done upon the use of the complement fixation in the diagnosis of certain gonorrheal infections and the results have justified the issue of a circular by the chief surgeon of the department, stating, that this test is now being done at the department laboratory as a routine measure, and it is hoped that enough material will accumulate during the coming year to enable the writer to prepare a report upon the exact value of this test to the military service.

Letterman General Hospital.

Capt. John R. Barber, Medical Corps, had charge of the pathological laboratory during the first half of the present year, and Capt. Corydon G. Snow, Medical Corps, during the latter half. The commanding officer states that—

The principal new feature of laboratory work adopted as a routine during the year, has been the examination of cerebrospinal fluid of all cases pointing to involvement of the cord or brain. This examination consists in a numerical and differential cell count; a butyric acid, Nonne-Apelt, and Wasserman test of the serum. We have also employed, for the past few months, the Lange colloid gold test, which, as far as our experience goes, appears to be of great value in determining and differentiating tabes, paresis and cerebrospinal syphilis. We are disposed to regard a careful and thorough examination of the cerebrospinal fluid one of the most useful laboratory procedures introduced within the last few years.

The phenol-sulphone-phthalein test is another new measure that we have employed this year, and while of great value in helping to determine the degree of renal function, has not the wide sphere of usefulness that the above-mentioned measure possesses.

Some interesting work in connection with the etiology of acute and chronic arthritides has been done by Capt. Snow. We believe it is a proved fact that with the exception of traumatic and gouty arthritides, all other joint troubles are dependent

upon a focus of infection somewhere in the body, and after tuberculous, gonorrheal, and syphilitic ones are excluded the casual agent would appear to be a coccus, which under different conditions and environment either in the body or upon culture media may assume different characteristics. In some of these cases we have succeeded in isolating the organism from the blood, and after removing the primary focus, infected tonsils, gums, sinuses, prostates, etc., obtained encouraging results with the use of antogenous vaccine.

A very interesting and puzzling case was received last year from Alaska, with a clinical diagnosis of farcy. The man was a packer, and at the time he was taken sick was upon the trail where a number of horses had died from what was considered to be glanders. Subcutaneous granulomata, associated with fever and debility, occurred. The nodules would soften, break down, discharge for a week or more, and then heal. This process was repeated over and over again, but no glanders organism could be found, and the animal inoculation experiments were negative. Wassermann and luetin tests were performed with negative results, and no improvement followed the use of salvarsan. Upon glucose agar, after incubating 10 days, a small pathogenic yeast was grown. The man made a prompt and permanent cure under potassium iodide.

Record of examinations—Pathological, bacteriological, and chemical laboratories, calendar year 1913.

Blood examinations	668
Urine examinations	3,893
Sputum examinations	1,453
Feces examinations	282
Stomach contents	58
Transudates and exudates	14
Spinal fluid	72
Cultures	112
Wassermann reactions	2,596
Special serum reactions	373
Special diagnostic reactions	27
Smear examinations	596
Chemical examinations, food, malt, milk, etc	43
Water examinations:	
Chemical	31
Bacteriological	331
Tissue examinations	53
Vaccines made	22
Typhoid prophylaxis, doses given	257
Animal immunization and inoculations	81
Autopsies	16
Typhoid examinations:	
Urine	3
Blood culture	27
Feces	13
Widal	24
Miscellaneous	21

Fort Sam Houston, Tex.

Capt. Clarence L. Cole, Medical Corps, assumed charge of this laboratory on May 1, 1913. He states that the volume of work has gradually increased from month to month. In addition to the routine work, including the serological work, some experiments were made with the stomoxys calcitrans to determine, if possible, whether this insect is connected with the transmission of cerebrospinal meningitis. These experiments were negative. Capt. Cole states that as soon as time permits he will take up the work of making the complement fixation tests for gonorrhea and the various modifications of the Abderhalden's serum pregnancy test.

Summary of laboratory examinations, May 1, 1913, to Dec. 31, 1913.

Examinations of—	
Blood	123
Feces	189
Urine	467
Sputum	222
Milk	4
Animal inoculations	53
Agglutination tests	51
Autogenous vaccines prepared	20
Autopsies performed	3
Water analysis	15
Wassermann reactions	1,434
Dark-field examinations for spirochetæ	26
Antigens prepared	4
Water analysis (bacteriological)	15
Specimens (microscopic slides added to cabinet)	195
Miscellaneous examinations	192

MEDICAL DEPARTMENT.

The Medical Department consists of the Medical Corps, the Medical Reserve Corps, the Dental Corps, the Army Nurse Corps, and the Hospital Corps.

The following statement shows the strength of the personnel, commissioned, enlisted, and employed, by contract or otherwise, of the Medical Department on June 30, 1914:

Medical officers	426
Medical reserve officers, active duty	91
Contract surgeons	16
Dental surgeons, commissioned	28
Acting dental surgeons, under contract	39
Army Nurse Corps	150
Hospital Corps	4,055
Civil employees	239
Total medical personnel	5,044

MEDICAL CORPS.

The medical Corps is composed of the commissioned medical officers of the Regular Army.

Authorized strength June 30, 1914	444
In service June 30, 1913	424
Appointed during the year	16
Total	440
Losses during the year	14
In service June 30, 1914	426

On October 1, 1913, 19 candidates who had passed the preliminary examination for appointment in the Medical Corps reported at Washington to take the course of instruction at the Army Medical School. Seventeen successfully completed the course of instruction at the school and were graduated June 1, 1914. Sixteen of the graduates were recommended for appointment in the Medical Corps of the Army.

Losses during the fiscal year.

	Brigadier general.	Colonel.	Lieutenant colonel.	Major.	Captains.	First lieutenants.	Total.
Retired			1	1	1		3
Resigned					2	2	4
Discharged						3	3
Died	1	1			2		4
Aggregate	1	1	1	1	5	5	14

The deaths were Brig. Gen. George H. Torney, December 27, 1913; Col. Daniel M. Appel, April 22, 1914; Capt. Joseph O. Walkup, June 1, 1914; Capt. Armin Mueller, October 14, 1913.

PROMOTIONS DURING THE FISCAL YEAR.

The following promotions were made: One colonel to brigadier general; 1 lieutenant colonel to be colonel; 2 majors to be lieutenant colonels; 3 captains to be majors; 41 lieutenants to be captains.

The department held two preliminary examinations for appointment in the corps, the first on July 14, 1913, and the second on January 19, 1914, at various posts throughout the country. Fifteen applicants passed the preliminary examinations. Of this number, 10 attended the session of the Army Medical School, which ended June 1, 1914, leaving 5 who will attend the next session of the school. A preliminary examination will be held on July 13, 1914, at various Army posts throughout the United States, to which 27 candidates have been invited.

MEDICAL RESERVE CORPS.

On roster June 30, 1913		1,205
Appointed during the year		96
		1,301
Losses during the year:		
Resigned	16	
Discharged	3	
Died	12	
Commissions vacated by appointment to regular corps	16	
		47
On roster June 30, 1914		1,254

Of the 1,254 on roster June 30, 1914, 91 were on active duty and 1,163 on the inactive list.

On active list June 30, 1913		105
Ordered to active duty during the year		54
		159
Relieved from active duty	48	
Commissions vacated	16	
Honorably discharged	2	
Resigned	2	
		68
On active duty June 30, 1914		91

An officer of the Medical Reserve Corps residing in the vicinity of each military post has been designated as a locum tenens, and the policy has been adopted of calling such officer into actual service for duty at his post when all the regular medical officers thereat are called upon to accompany troops into the field. When the Second Division was mobilized in February, 1913, the medical officers were thus enabled to promptly leave the posts with the troops, their places being filled in the manner indicated.

CONTRACT SURGEONS.

In service June 30, 1913	9
Contracts made during the year	12
Total	21
Contracts annulled during the year	5
Contracts in force June 30, 1914	16

These contract surgeons are on duty at arsenals, remount depots, transports, etc., at the rate of pay ranging from $75 to $150 per month.

DENTAL CORPS.

Number of dental surgeons in service June 30, 1913	28
Acting dental surgeons in service June 30, 1913	23
Appointed during the year	19
Total	42
Contracts annulled	3
On duty June 30, 1914	39
Total	67

Two examinations of applicants for appointment as acting dental surgeons, United States Army, were held during the year—the first on October 13, 1913, and the second on April 13, 1914. On the first examination 13 candidates were successful; 12 received contracts and 1 declined contract. At the second examination 10 were successful, but it was possible to give contracts to only 7 of the number, as the act of Congress making appropriations for the fiscal year 1914–15 made provision for only 40 acting dental surgeons.

Under the act of March 3, 1911, acting dental surgeons who have served three years in a satisfactory manner become eligible for appointment as dental surgeons, and, after passing the prescribed examination, are eligible for commission in the Dental Corps with the rank of first lieutenant, provided the total number of dental surgeons of that rank did not exceed 60. Two acting dental surgeons will become eligible for such promotion during the latter part of the calendar year 1914, and the vacancies in the grade of acting dental surgeon occasioned by such promotions or arising from any other cause will be filled from the list of successful applicants who have not already been appointed. It probably will not be necessary to hold another examination for candidates for appointment as acting dental surgeon until April, 1915.

HOSPITAL CORPS.

The authorized strength of the Hospital Corps is as follows:

Sergeants, first class	300
Sergeants	422
Corporals	50
Privates, first class, and privates	4,240
Total	5,012

The number of sergeants, first class, is fixed by law; the total strength of the Hospital Corps and the number in the various other grades is determined by Executive order.

Acting cooks are appointed from privates, first class, or privates, and it is estimated that about 225 are required under present conditions.

Strength at date of last report, June 30, 1913:	
Sergeants, first class	295
Sergeants	336
Corporals	38

Strength at date of last report, June 30, 1913—Continued.	
Acting cooks	190
Privates, first class, and privates	2,560
Total	3,419
Gain, July 1, 1913, to June 30, 1914:	
By enlistment	974
By transfer from line, including unassigned recruits from depots	1,395
By return from desertion	112
Total	2,481
Loss during same period:	
By discharge, expiration of term of service	1,175
By discharge by order	204
By discharge, certificate of disability	37
By discharge, sentence general court-martial	127
Transfer to line	57
By retirement	23
By death due to disease	17
By death due to drowning, wounds, and other accidental causes	4
By death, suicide	2
By desertion	195
Dropped	4
Total	1,845
Leaving in service June 30, 1914:	
Sergeants, first class	300
Sergeants	399
Corporals	41
Acting cooks	180
Privates, first class, and privates	3,135
Total	4,055

Attention has been repeatedly called to the deficiency in the number of Hospital Corps authorized for service, and recommendation made for an increase. On April 29, 1914, the Secretary of War authorized an addition of 1,500 men, making a total of 5,012 for the corps. May 9, 1914, authority was granted for the appointment of 60 additional sergeants. To date 543 men in excess of the number previously allowed (3,512) have been reenlisted in, enlisted for, or transferred from the line to the Hospital Corps. The greater number of these men were used in the organization of new mobile units and field vacancies in the Second Division and with organizations on duty on the Mexican border.

The class of men secured for the Hospital Corps have by no means been satisfactory. During the excitement attending a possibility of active service in a campaign beyond the limits of the United States, a greater proportion of desirable men presented themselves for enlistment, and the commanding officer of one of the new organizations reported that he was receiving better men than had been serving with the detachment at his post. With passage of the incentive, the quality again deteriorated. A commanding officer of a post in commenting on his detachment expressed himself as follows:

> The sergeant is efficient and energetic, but the Hospital Corps men, with the exception of the sergeant, are the riffraff of the Army—and I am not putting it too strongly. In two or three cases they are not only woefully inefficient but are not clean personally. I have directed the surgeon to make a special report in the case and will give him any help he needs from our own troops. I really think that these men were transferred to rid some other command of worthless men—an almost criminal procedure when one considers how badly good Hospital Corps men are needed.

In each annual report of the Surgeon General for the past two or three years, attention has been invited to the inferior character of a considerable proportion of the men who are accepted for the Hospital Corps. And the reason for this has been pointed out, viz, the inferior inducements offered by the Hospital Corps in comparison with the opportunities offered by other branches of the service. Bills have been introduced in Congress for improvement in this respect along the lines recommended by this office, but these have not received the approval of the War Department. It is earnestly recommended either that this disapproval be reconsidered or else that other inducements be made by means of special ratings or in any other way whereby service in the Hospital Corps can be made sufficiently attractive to secure a desirable class of men.

Fortunately, however, all the men secured, even under the present unfavorable condition, are not undesirable men and a number of individual cases have occurred during the year where enlisted men of the Hospital Corps have rendered efficient and distinguished service. In October, 1913, a train carrying a band and two companies of Coast Artillery Corps, left the track and crashed through a wooden bridge near Buckatunna, Miss., and as a result, 17 men were killed and nearly 100 more or less seriously injured. Sergt. Halbert M. Beasley, Hospital Corps, although he was himself injured, worked unceasingly in rendering first aid and assisting in the removal of the wounded. For this he was awarded a certificate of merit. On March 25, 1914, Pvt. First Class Thomas Mosely, Hospital Corps, was awarded a certificate of merit for distinguished gallantry in action against hostile Moros while private, Hospital Corps, when he bandaged a wounded officer, in the face of a heavy fire from the Moro trenches, and carried him to a place of safety at the risk of his own life. This at Bagsak Mountain, Jolo, P. I., June 11, 1913.

On April 21, 1914, Pvt. First Class Edward W. Morrison, Hospital Corps, was awarded a certificate of merit for meritorious conduct in rendering first aid to wounded comrades under fire of hostile Moros at Mamaya Peak, P. I., December 15, 1913. On March 6, 1914, a private of the Signal Corps detachment at Nulato, Alaska, presented evidence of an appendiceal abscess. No medical officer was present with this small detachment, but Sergt. First Class Richard A. Wood, Hospital Corps, diagnosed the case and communicated by telegraph with the surgeon at Fort Gibbon, about 250 miles distant. The surgeon started, but the distance had to be traveled by dog team and at least four days would be required for the trip. Two days later Sergt. Wood communicated with the surgeon by telegraph and stated the urgency of the symptoms and the condition of the patient. The condition of the soldier was so urgent as to demand immediate operative interference and Sergt. Wood was authorized to proceed. On the same day the sergeant opened and drained the abscess under a local anesthesia. When the surgeon arrived the patient was in good condition. The surgeon reports that in his belief Sergt. Wood, by performing a prompt drainage of the abscess, greatly facilitated the patient's recovery and probably saved his life.

In the last annual report and on many other occasions attention has been invited to the deficiency in the number of field hospitals and ambulance companies, making it impossible to provide these mobile units for service with troops in the field. In April and May,

1914, authority was given for the organization of four evacuation hospitals, three additional field hospital companies, and seven additional ambulance companies. To date Evacuation Hospital No. 1, at Galveston, and Evacuation Hospital No. 2, at Fort Thomas, Ky., have been organized. The first of these is practically complete; the second is still a skeleton. Field Hospital Co. No. 5 and Ambulance Co. No. 5, with the Second Division at Texas City, and Field Hospital Co. No. 7 and Ambulance Co. No. 7 for the Cavalry division, with station at Fort Sam Houston, and Ambulance Co. No. 8 with Evacuation Hospital No. 1, at Galveston, have been organized and are practically complete in personnel and equipment, including transportation. Field Hospital Co. No. 6 and Ambulance Co. No. 6, belonging to the First Division, but temporarily stationed at Walter Reed General Hospital, are practically complete except as to transportation. None of these organizations have barracks and quarters or stables or wagon sheds belonging to them. The organizations belonging to the Second Division, being in the field, are under field-service conditions, and consequently the deficiency is not felt. Should the division be broken up, however, and the constituent organizations be returned to posts, Field Hospital Co. No. 5 and Ambulance Co. No. 5 would be homeless. The organizations of the Cavalry divisions are at present sheltered in buildings at Fort Sam Houston which belong to Cavalry organizations temporarily in the field. Should these return to the post, it is believed that Field Hospital Co. No. 7 and Ambulance Co. No. 7 would be evicted. Field Hospital Co. No. 6 and Ambulance Co. No. 6, while a tactical part of the First Division and under the command of the Eastern Department, occupy a building at the Walter Reed General Hospital, and accommodations thereat are so limited that no place can be found to shelter and care for the necessary transportation. For this reason the organizations have been provided with only a small portion of the necessary transportation, and consequently are not in a position to take the field.

It is earnestly recommended that estimates be prepared and legislation be obtained for the construction of the necessary barracks and quarters, stables, and wagon sheds for the proper housing of each of these organizations. Inasmuch as these mobile units of the Medical Department are divisional troops of their respective divisions, such construction should be in proximity to division headquarters—New York City, Chicago, and Fort Sam Houston.

ARMY NURSE CORPS.

During the period covered by this report the authorized strength of the Army Nurse Corps has been 150, an increase of 25 having been authorized, effective July 1, 1913. The total authorized number was in the service at the end of the fiscal year.

During the year 761 requests for application blanks had been received from graduate nurses, being an increase of 112 over the number of applicants for the preceding year. This interest in the organization has been due, largely, to the efforts of the superintendent of the Nurse Corps, she having been in close and constant touch with the leading training schools for nurses throughout the country. Fifty-seven original appointments and 3 reappointments have been made and 25 nurses have been discharged from the corps by reason of expiration of term of service or by their own request for personal reasons.

Nurses have been on duty at the following stations:

Letterman General Hospital, San Francisco, Cal.
Walter Reed General Hospital, Takoma Park, D. C.
Army General Hospital, Fort Bayard, N. Mex.
Army and Navy General Hospital, Hot Springs, Ark.
Department Hospital, Honolulu, Hawaii.
Department Hospital, Manila, P. I.
Fort William McKinley, Rizal, P. I.
Fort Leavenworth, Kans.
Attending Surgeon's Office, Washington, D. C.
Office of the Surgeon General.
From the beginning of the fiscal year until April, 1914, at Pettit Barracks, Zamboanga, P. I.

Owing to the withdrawal of a large number of troops from the District of Mindanao, the hospital at Pettit Barracks was discontinued as a district hospital and the nurses withdrawn therefrom.

With the occupation of Vera Cruz by United States forces it became necessary to provide nurses for duty therewith, and nine members of the Army Nurse Corps were ordered to that point, this number being supplemented by three enrolled Red Cross nurses, who were serving under contract with the Medical Department.

During the year new quarters for nurses have been completed at the Army and Navy General Hospital at Hot Springs, Ark., and these are now occupied.

ARMY MEDICAL SCHOOL.

Commandant, Col. Charles Richard, Medical Corps, United States Army; adjutant, Maj. Reuben B. Miller, Medical Corps, United States Army.]

Lieut. Col. James D. Glennan, Medical Corps, United States Army, was assigned to duty at the Army Medical School, as professor of Medical Department Administration, September 8, 1913, relieving Maj. Charles R. Reynolds, Medical Corps, United States Army.

Lieut. Col. Champe C. McCulloch, jr., Medical Corps, United States Army, was assigned to duty at the Army Medical School, as professor of military medicine and tropical medicine, September 8, 1913, relieving Col. Walter D. McCaw, Medical Corps, United States Army.

Maj. William J. L. Lyster, Medical Corps, United States Army, was assigned to duty at the Army Medical School, as professor of military hygiene, June 20, 1913, relieving Lieut. Col. Francis A. Winter, Medical Corps, United States Army.

Maj. Eugene R. Whitmore, Medical Corps, United States Army, was assigned to duty at the Army Medical School, as professor of bacteriology, pathology and clinical diagnosis, August 14, 1913, relieving Maj. F. F. Russell, Medical Corps, United States Army.

Maj. Reuben B. Miller, Medical Corps, United States Army, was assigned to duty at the Army Medical School as professor of sanitary chemistry, July 23, 1913, relieving Maj. Carl R. Darnall, Medical Corps, United States Army.

Capt. Edward B. Vedder, Medical Corps, United States Army, was assigned to duty at the Army Medical School, as assistant professor of bacteriology, pathology, and clinical diagnosis, August 14, 1913, relieving Capt. Charles F. Craig, Medical Corps, United States Army.

Capt. Edward M. Talbott, Medical Corps, United States Army, was assigned to duty at the Army Medical School as assistant professor of ophthalmology, September 8, 1913, relieving Capt. William T. Davis, Medical Corps, United States Army, resigned.

The eighteenth session of the school began October 1, 1913, and ended June 1, 1914.

The number of accepted candidates appointed in the Medical Reserve Corps and admitted to the school was 19.

Two members of the medical corps of the Organized Militia, one from the Mississippi National Guard and one from the National Guard of Missouri, were admitted to the school and upon the completion of a four months' course, were issued certificates of proficiency and reported to The Adjutant General of the Army as qualified to perform the duties of regimental surgeon in the Organized Militia.

One student candidate was relieved from duty at the school February 6, 1914, and honorably discharged from the service because of permanent illness; one failed to pass the mid-term examination and was relieved from duty February 7, 1914, and discharged the service; 17 completed the course and qualified in the final examination; of this number, 16 were recommended for commission in the

Medical Corps of the Army, and 1 failed to receive such recommendation because of deficiency in aptitude for the military service.

The following table shows the subjects taught, the number of hours devoted to each, names of the instructors, and the value of the several subjects:

No.	Subject.	Hours of instruction.	Professor.	Value.	
				Maximum.	Minimum.
1	Medical department, administration.	52	Lieut. Col. James D. Glennan	800	640
2	Bacteriology, pathology, and clinical diagnosis.	273	Maj. Eugene R. Whitmore; assistants, Capt. Edward B. Vedder, Capt. H. J. L. Nichols.	900	720
3	Military hygiene	20	Maj. Wm. J. L. Lyster	800	640
4	Military surgery	30	Col. Charles Richard	800	640
5	Military and tropical medicine	33	Lieut. Col. C. C. McCulloch, jr.	800	640
6	Sanitary chemistry	170	Maj. Reuben B. Miller	600	480
7	Sanitary tactics	78	Capt. Wm. A. Wickline	500	400
8	Operative surgery	13	Capt. Arthur C. Christie	400	320
9	Ophthalmology	55	Maj. P. S. Halloran; assistant, Capt. Edw. M. Talbott.	400	320
10	Radiology	26	Capt. Arthur C. Christie	400	320

In addition to the above the following instruction was given: Series of 9 lectures on military law by Maj. Blanton Winship, Medical Corps; a series of 12 lectures and clinical demonstrations in psychiatrics at the Government Hospital for the Insane by Dr. William A. White and Capt. Edgar King, Medical Corps; 39 hours in equitation at Fort Myer, Va., by First Lieut. John W. Downer, Third Field Artillery, United States Army, instructor.

A series of interesting and very instructive lectures was delivered by the special professors, session 1913–14, as follows: "The prevention and control of infectious diseases," by First Lieut. Alexander C. Abbott, Medical Reserve Corps, United States Army, of Philadelphia, Pa., three lectures; "Anoci association, its practical application to modern surgery," by First Lieut. George W. Crile, Medical Reserve Corps, United States Army, of Cleveland, Ohio, two lectures; "Gastric and duodenal ulcers," two lectures; and "Mammary cancer," one lecture, by First Lieut. William L. Rodman, Medical Reserve Corps, United States Army, of Philadelphia, Pa.; "Cardiac arythmia and circulatory efficiency," by First Lieut. Alfred Stengel, Medical Reserve Corps, United States Army, of Philadelphia, Pa., one lecture.

First Lieut. S. J. Meltzer, Medical Reserve Corps, United States Army, of the Rockefeller Institute for Medical Research, New York, N. Y., demonstrated his method of pharyngeal insufflation as a method of artificial respiration, May 4, 1914. One officer of the Medical Corps, United States Army, attended the school during the session, for a special course in serology and bacteriology, preparatory to taking charge of one of the department laboratories.

One sergeant, first class, Hospital Corps was detailed at the school for instruction in X ray work and photography; he has proven apt and has acquired the technical knowledge and skill necessary to qualify him as instructor in these subjects. One sergeant, Hospital Corps, detailed at the school for this instruction, has not yet completed his course. One sergeant, first class, and one sergeant, Hos-

pital Corps, voluntarily attended the school, for instruction in X-ray work and photography, and were given certificates of proficiency.

The closing exercises were held in the lecture room of the school, at 2 o'clock p. m., Monday, June 1, 1914. The graduating class was addressed by First Lieut. Henry C. Coe, Medical Reserve Corps, United States Army, of New York, N. Y. The diplomas were presented by Brig. Gen. William C. Gorgas, Surgeon General of the Army. Col. John Van R. Hoff, United States Army, retired, presented the Hoff memorial medal to First Lieut. Charles L. Gandy, Medical Reserve Corps, United States Army; and the Sternberg medal was presented by the founder, Dr. Richard Slee, to First Lieut. Alexander W. Williams, Medical Reserve Corps, United States Army.

In addition to these lectures there were clinical demonstrations by Capt. King on the various symptoms of mental disease, a lecture on the mental diseases which are most frequent in military service, a lecture on the general symptomatology of dementia precox, a lecture on the syphilitic diseases of the brain and cord, a lecture on the classification of mental diseases which experience has shown to be usable in the military service, and talks upon the mental conditions most frequently observed during hostilities, and the general effect of war in producing mental disease.

SPECIAL WORK OF MEDICAL OFFICERS.

DETENTION CAMPS FOR MEXICAN REFUGEES.

After the fight at Ojinaga the beaten Federals retreated across the Rio Grande to United States territory. They were promptly disarmed and marched to Fort Bliss, Tex., where a detention camp was established outside of the post for the reception of nearly 5,000 Mexicans. This included women and children who had accompanied the troops. Maj. Wilson T. Davidson, Medical Corps, was the first medical officer in charge of the sanitation of this camp, and was shortly succeeded by Maj. Clarence J. Manly. Smallpox, typhoid fever, and other diseases were prevalent among these prisoners when they arrived. The possibility of any epidemic from any such sources was promptly prevented by the vaccination against smallpox and the administration of the antityphoid prophylaxis. Both of these diseases shortly disappeared after the completion of these two measures.

The general health of the prisoners has been good. Most of the deaths were confined to those who were suffering from complaints prior to their reaching this camp. Early in May, following the continued disturbance on the border, they were moved to Fort Wingate, N. Mex.

NEW TENT FOR FIELD HOSPITALS.

A new tent for field hospitals was adopted to take the place of the former "hospital tent." The new tent was largely the result of investigations and recommendations made by Maj. Harry L. Gilchrist of the Medical Corps, following his experiences in 1911 at the Maneuver Division. The tent is 50 feet long and results in a great saving of weight and a more commodious shelter for the sick and wounded. In fact, due to the saving in weight by the adoption of this tent, it is possible with the former transportation, to carry more bed units and thus increase the capacity of the field hospital.

MOSQUITO BAR.

A mosquito bar for use with the shelter tent when conditions demand the protection of such an appliance, has been formally adopted by the Quartermaster Department. This bar was devised by Capt. Edward B. Vedder of the Medical Corps, and it is believed it will play an important part in the Tropics through its protective value in the field against mosquito-borne diseases.

SPECIAL PUBLICATIONS BY MEDICAL OFFICERS.

The interesting series of articles by Capt. Louis C. Duncan, Medical Corps, on "The Medical Department of the United States Army in the Civil War," were compiled during the year. Capt. Duncan in this series covered the following subjects:

The Battle of Bull Run.
Pope's Virginia Campaign.
Evolution of the Ambulance Corps and Field Hospital.
The Bloodiest Day in American History—Antietam.
The Battle of Fredericksburg.
High Tide of the Confederacy—Gettysburg.
The Great Battle of the West—Chickamauga.
The Battle of the Wilderness.
When Sherman Marched Down to the Sea.

These articles were all published in the Military Surgeon. Another article by the same author for which he received the Seaman's prize offered by the Journal of the Military Service Institute, upon the subject of "The Comparative Mortality of Disease and Battle Casualties in the Historic Wars of the World," was published in the journal named April–May, 1914, issue. A thousand reprints of these articles were purchased by this office from the journals. These articles, with the preface written by Capt. Duncan, were bound in book form by this office for distribution to the military hospitals and the officers of the Medical Corps and Medical Reserve Corps. The author in preparing these articles has fulfilled a long-felt want. They are exceedingly valuable to the student of military medical administration and are of great permanent value.

Among the list of publications in the last annual report, mention was made of a monograph upon the subject of beriberi, by Capt. Edward B. Vedder, Medical Corps. The manuscript of this monograph was submitted by Capt. Vedder to the committee in competition for the Cartwright prize of the alumni of the College of Physicians and Surgeons, Medical Department of Cornell University, Ithaca, N. Y., for the year 1913. This prize was awarded to the author and the monograph was then published by the William Wood & Co. of New York, N. Y. This is a most valuable addition to the literature upon this subject. It fully covers the subject and contains the record of much original work by the author and his co-workers on the Board for the Study of Tropical Diseases as they exist in the Philippine Islands.

During the year Capt. Arthur C. Christie, of the Army Medical School, prepared for publication a Manual of X-Ray Technique. This work was published by the J. B. Lippincott Co., and has been distributed by this office to the various military hospitals. This book has been the subject of a number of favorable reviews by medical journals, both in this country and abroad. It is brief and concise, but covers the subject well, and for a large class of professional men in this country in civil practice, as well as in the military service, who are doing a limited amount of work of this character, it is a most valuable addition to their library.

A most interesting report on "The Wounded at Ojinaga," on January 2, 1914, was forwarded to this office by Capt. Louis C. Duncan, Medical Corps. This article was published in the Military Surgeon, issue of May, 1914.

An excellent and well-prepared manuscript of a book on "First Aid Dentistry" was submitted to this office by Dental Surg. E. P. R. Ryan, who has since left the service. The book, published by P. Blakiston's Son & Co., of Philadelphia, Pa., contains many valuable suggestions for emergency treatment. One hundred and twenty-two copies were purchased by the Medical Department and distributed to the larger posts.

Mention was made in the last annual report of the services rendered to sick and wounded soldiers by Maj. Clyde S. Ford, Medical Corps, United States Army, during the Balkan Wars. At the urgent request of the American ambassador to Turkey, the War Department placed Maj. Ford on temporary duty. In 1913, from January to May, he was in charge of the American Red Cross field hospital at Tash Kishla, Constantinople, a 120-bed hospital, which cared for 500 surgical cases before and after the first armistice, and was assisted by a Greek doctor and a Turkish doctor of the Reserve Medical Corps. This followed his establishing a hospital in November, 1912, for cholera patients among the Turkish troops from the Chatalja lines. Six hundred of these cases were cared for, with 125 deaths. From July 11 to 12, 1913, he gave his services to the evacuation hospital attached to the Fifth Field Army of Bulgaria at Kustendil, near the Macedonian frontier. Some 4,000 cases went through this hospital in the month, 2,000 of which were treated in the section in which Maj. Ford and one Bulgarian surgeon served. He was placed in charge of the Queen's Hospital at Kustendil for a week when the evacuation of the town was threatened, due to the approach of the Servian Army, the service staff of this hospital having been withdrawn. For these services he volunteered while on sick leave and when convalescing from a severe operation. That the character of his services were appreciated by the Turkish and Bulgarian Governments is indicated by the fact that he had conferred upon him the Turkish Order of the Osmanyè and the Bulgarian Order of Military Merit, Officers' Cross. He was presented by the Queen of Bulgaria with a medal for personal service under her direct on, and also with a medal for war service with the Bulgarian National Red Cross. It is a matter of gratification to this office and to the corps that he should receive personal recognition of this character.

Maj. Bailey K. Ashford, Medical Corps, United States Army, has continued his work in Porto Rico as president of the Board for the Study of Tropical Diseases as they exist in Porto Rico, and, in connection therewith, has cooperated during the year with the Institute of Tropical Medicine and Hygiene of Porto Rico. A large amount of work was done among the natives of Porto Rico in caring for those suffering from various diseases and in instructing them in sanitation.

Capt. J. F. Siler, Medical Corps, United States Army, has continued as a member of the Thompson-McFadden Pellagra Commission, at Spartanburg, S. C., which was formed early in June, 1912, for the study of pellagra in the Southern States. Several interesting reports have been published covering the work done so far. It is hoped that this commission will largely advance our knowledge concerning pellagra.

ARTICLES BY MEDICAL OFFICERS.

Articles by medical officers of the Army approved for publication by the Surgeon General's Office, July 1, 1913, to June 30, 1914.

Author.	Article.	Published in—
Ashburn, Maj. Percy M.	Report of a trip to China. (See also Board for the Study of Tropical Diseases.)	Military Surgeon, February, 1914.
	The control of typhoid fever in the Army and on the Isthmus of Panama.	Publication not known.
	Six-day fever and dengue in Panama.	Do.
Ashford, Maj. Bailey K.	Medical work in Porto Rico	Official Organ of the Presbyterian Mission, 1913.
	Parasites and occupation	Chapter of "Occupational Diseases," 1914.
Ashford, Capt. Mahlon	Statistical report of venereal prophylaxis, etc.	Military Surgeon, July, 1914.
Baketel, First Lieut. H. S., M. R. C.	The Gettysburg veterans' encampment from a medical standpoint.	Military Surgeon, September, 1913.
	The field hospital in peace and war	Military Surgeon, November, 1913.
	The Army Medical Corps; some data thereon.	New York Medical Journal, April, 1914.
Bispham, Maj. Wm. N.	Malingering	Military Surgeon, March, 1914.
Bourke, Capt. James	Primary carcinoma of the pancreas	Journal of American Medical Association, March, 1914.
Brooke, Maj. Roger	Concerning the freedom of Cebu from malaria.	Military Surgeon, March, 1914.
	The general action of quinine in the treatment of amebic dysentery.	Journal of American Medical Association, March, 1914.
Bushnell, Col. G. E	The extension of tuberculosis in the immune lung.	Medical Record, March, 1914.
Callender, Lieut. Geo. R.	Report of a case of cardiac syphilis	Publication not known.
Chamberlain, Maj. W. P.	The etiology of beriberi; character of rice which causes polyneuritis in man and fowl. (See also Board for Study of Tropical Diseases.)	Read before Medical Society of Clinton, N. Y. New York Medical Record, February, 1914.
	Hints for line officers regarding the diseases liable to be met with in Mexico and the general methods of combating them.	Journal of Military Service Institution, May–June, 1914.
	The influence of tropical residence on the blood.	Read before eleventh annual meeting of the American Society of Tropical Medicine, Boston. American Journal of Tropical Diseases and Preventive Medicine, July, 1914.
	Spirochætæ and fusiform bacilli in various lesions in the Philippines.	Read before eleventh annual meeting of the American Society of Tropical Medicine, Boston, May 29–30, 1914. Not yet published.
Christie, Capt. A. C.	Manual of X-ray technique	Published in 1913.
Church, Maj. Jas. Robb	Report of a case of leontiasis ossium. (Collaborated with Capt. Jay W. Grissinger.)	Not yet published.
Cole, Capt. C. L.	Antityphoid measures now taken in the United States Army.	Read before the District Medical Society, San Antonio, Tex. The Bulletin, Bexar County Medical Society, San Antonio, Tex., December, 1913.
Craig, Capt. Chas. F.	The differential diagnosis of the intestinal entamebæ of man.	Archives of Internal Medicine, June, 1914.
	The classification of amebæ with special reference to the parasitic species.	American Journal of Tropical Diseases and Preventive Medicine, November, 1913.
	Observations upon the parasitic amebæ of the human intestines.	Commemoration volume issued at one hundredth anniversary of medical department of Yale University, at request of committee.
	On variations in the strength of the Wassermann reaction in untreated syphilis infections.	Journal of American Medical Association, April, 1914.
	The influence of treatment with salvarsan upon the complement fixation test for syphilis.	Bulletin No. 3, S. G. O., June, 1913.
	A serological study of syphilitic relapses following treatment with salversan.	Do.
	The diagnosis of syphilis by the complement fixation test.	Do.

Articles by medical officers of the Army approved for publication by the Surgeon General's Office, July 1, 1913, to June 30, 1914—Continued.

Author.	Article.	Published in—
De Lanney, Lieut. E. L., M. R. C.	Treating gelatin capsules with formaldehyde solution for ipecac medication.	Military Surgeon.
Duncan, Capt. Louis C.	The greatest battle of the war—Gettysburg (Part I).	Military Surgeon, September, 1913.
	The greatest battle of the war—Gettysburg (Part II).	Military Surgeon, November, 1913.
	The wounded at Ojiinaga	Military Surgeon, May, 1914.
	The comparative mortality of disease and battle casualties in the historic wars of the world.	Journal of Military Service Institution, March–April, 1914.
Dutcher, Maj. B. H.	Recovery of embryo of filaria bancrofti from blood from the lung during daytime.	London Journal of Tropical Medicine and Hygiene, June, 1914.
	Note on a new geographic locality for balantidiosis coli.	Journal of Tropical Medicine, April, 1914.
Fauntleroy, Maj. P. C.	A suggestion for a pocket field case for medical officers with actively-moving commands.	Military Surgeon, April, 1914.
	Mess efficiency	Publication not known.
	An emergency case	Do.
Gentry, Lieut. E. R.	(See Board for Study of Tropical Diseases.)	
Garcia, Capt. Leon C.	The practical application of the principles of military first aid in railway surgery.	Journal of American Medical Association, January, 1914.
Haines, Lieut. E.F., M. R. C	Observations of the results of nine months' experience with neosalvarsan at the United States military prison, Fort Leavenworth, Kans. (Collaborated with Maj. Kent Nelson.)	Journal of American Medical Association, March, 1914.
Harris, Capt. Jesse R.	Supernumerary nipples in the male.	Publication not known.
	Flat feet	Military Surgeon, January, 1914.
Hartsock, Maj. F. M.	Emetine in dysentery	Read before twenty-second annual meeting of the Association of Military Surgeons. Military Surgeon, December, 1913.
Jones, Capt. Glenn I.	Hepatic abscess (nonamebic) and gastro-intestinal myiasis.	Journal of American Medical Association, November, 1913.
	Colonic and pericolonic abnormalities.	Publication not known.
Kirk, Lieut. Norman T.	(Collaboration with Capt. Wm. H. Smith.)	
Kremers, Capt. Edw. D.	Adenomata of the islands of Langerhans.	Journal of Medical Research, October, 1913.
McCulloch, Lieut. E. C.	Rhinal myiasis	Not yet published.
McKinney, Capt. G. L.	Disease and the garrison ration	Military Surgeon, April, 1914.
Meister, Lieut. W. B.	Cocainism in the Army	Do.
Michie, Lieut. H. C.	Investigation relative to the life cycle, breeding, and some practical means of reducing the multiplication of flies in camp.	Military Surgeon, August, 1914.
Miller, Maj. R. B.	Sanitation of the Second Division, U. S. Army, at Texas City and Galveston, Tex., Mar. 1 to July 31, 1913.	Military Surgeon, December, 1913.
Nelson, Maj. Kent	Observations of the results of nine months' experience with neosalvarsan at the U. S. Military Prison, Fort Leavenworth, Kans. (Collaborated with Lieut. E. F. Haines, M. R. C.)	Journal of American Medical Association, March, 1914.
Nichols, Capt. H. J.	The relation of experimental syphilis to eugenics.	Medical Record, January, 1914.
	Observations on a strain of spirochæta pallida, isolated from the nervous system.	Journal of Experimental Medicine, April, 1914.
	Syphilis as a public health question	Journal of American Medical Association, May, 1914.
	The cure of syphilis	Bulletin No. 3, S. G. O., June, 1913.
	Nervous relapses	Do.
	Spirochæta pallida	Do.
	The specific diagnosis of syphilis	Do.
	Symposium on results of salvarsan therapy in the Army.	Do.
O'Connor, Maj. R. P.	Ocular muscles, method of shortening same without sutures.	Publication not known.
Phillips, Capt. H. A.	Report of one hundred wounds received in the battle of Nuevo Laredo, Jan. 1–2, 1914.	Military Surgeon, May, 1914.
Pierson, Capt. R. H.	Epidemic poliomyelitis and distemper of dogs.	Journal of American Medical Association, February, 1914.

Articles by medical officers of the Army approved for publication by the Surgeon General's Office, July 1, 1913, to June 30, 1914—Continued.

Author.	Article.	Published in—
Pierson, Capt. R. H.	Importance of blood pressure readings in annual examination of field officers.	Military Surgeon, May, 1914.
	Gastric ulcer from overworking the stomach.	Journal of American Medical Association, January, 1914.
	A bit of routine in Alaskan military service.	Not yet published.
Raymond, Lieut. Col. H. I.	Prophylaxis under G. O. 31, W. D., 1912, for Hawaiian Department.	Military Surgeon, February, 1914.
Reasoner, Capt. M. A.	Military sanitation at Texas City, Tex.	Read before Montgomery County (Ill.) Medical Society.
Reno, Maj. W. W.	The operation of the Army Medical Department in time of war.	University of Kansas Graduate Magazine, 1913.
	The ambulance-travois system of transporting wounded on the battle field.	Military Surgeon, December, 1913.
	Convenient stake-pulling and stake-driving cap for shelter tents.	Infantry Journal, September-October, 1914.
	Shoes for all people by prescription.	Medical Times, June, 1914.
Robbins, Maj. C. P.	Report of a case of dextrocardia.	Publication unknown.
Rukke, Capt. Guy V.	Antityphoid vaccination.	Read before joint meeting of Morgan and Cass Counties (Ill.) Medical Societies. Illinois Medical Journal, October, 1913.
Russell, Maj. F. F.	Recent results with typhoid vaccination.	Address delivered before the Clinical Society of New York, Post Graduate School and Hospital, Feb. 20, 1914. The Post Graduate, April, 1914.
	Antityphoid vaccination.	American Journal of the Medical Sciences, December, 1913.
	Studies of syphilis.	Introduction, Bulletin No. 3, S. G. O., 1913.
	Antityphoid vaccination in the Army during 1913.	Journal of American Medical Association, May, 1914.
	Prophylaxis of typhoid fever by means of vaccines.	Chapter of Forschheimer's Therapeutics, 1914.
Rutherford, Maj. H. H.	Proposing and describing physical surveys as a measure for further systematizing the work of physical improvement in the service.	Military Surgeon, March, 1914.
Smith, Capt. Wm. H.	Foreign body in the submaxillary gland. (Collaborated with Lieut. N. T. Kirk.)	Journal of American Medical Association, August, 1914.
Stark, Maj. A. N.	Some sanitary data concerning international troops serving under similar conditions in North China for the year ending Dec. 31, 1912.	Military Surgeon, December, 1913.
Tropical Diseases, Board for the Study of.	Report for quarter ending Sept. 30, 1913.	Military Surgeon, March, 1914.
	The prevention of scurvy.	Publication not known.
	Hydrophobia in a wild Philippine monkey.	Journal of American Medical Association, February, 1914.
	The study of tropical diseases.	Publication not known.
	Treatment of sprue by emetine hydrochloride.	Military Surgeon, April, 1914.
	Leprosy, its relationship to treponemata.	Do.
	Concerning varioloid in Manila.	Military Surgeon, July, 1913: Philippine Journal of Science, October, 1913.
	The relationship of variola and vaccinia.	Philippine Journal of Science, February, 1914.
	Some experiments on the inoculation of monkeys with smallpox.	Philippine Journal of Science, December, 1913.
Vedder, Capt. Edw. B.	Origin and present status of the emetine treatment of amebic dysentery.	Journal of American Medical Association, February, 1914.
	Some further remarks on beriberi.	American Journal of Tropical Diseases and Preventive Medicine, June, 1914.
	(See also Board for Study of Tropical Diseases.)	
Wadhams, Maj. S. H.	Epidemic meningitis and meningo bacterin.	Military Surgeon, August, 1913.
Walkup, Lieut. J. O.	Pulmonary syphilis.	Publication not known.
Whitmore, Maj. E. R.	Dysentery in the Tropics.	Read before Medical Association of Greater City of New York. New York Medical Journal, August, 1913.
	A study of the amœba in a case of amebic dysentery originating in New York.	The Post Graduate, November, 1913.

BULLETINS.

In the sundry civil bill for 1914, under the appropriation for printing and binding for the War Department, it was provided:

That the sum of $3,000, or so much thereof as may be necessary, may be used for the publication from time to time of bulletins prepared under the direction of the Surgeon General of the Army for the instruction of medical officers when approved by the Secretary of War.

Due to funds not being available the effort to publish a bulletin quarterly was nullified and only one has been issued during 1913. This was Bulletin No. 4, printed in November, 1913, entitled, "Disease-Bearing Mosquitoes of North and Central America, the West Indies, and the Philippine Islands," by C. S. Ludlow, Ph. D., anatomist, Army Medical Museum.

A bulletin is now in press entitled, "Mental Disease and Defect in United States Troops," by Capt. Edgar King, Medical Corps, United States Army.

A manuscript of another bulletin has been forwarded to this office for publication. This is entitled, "The Prophylaxis of Malaria with Special Reference to the Military Service," by Capt. Charles F. Craig, Medical Corps, United States Army.

A further bulletin will be published during the fall. This will be a bulletin on radiographic work by Capt. Arthur C. Christie, Medical Corps, United States Army. It is hoped the publication of these bulletins will stimulate other officers in the service to contribute the results of original work for publication in this manner.

A complete list of the titles of the bulletins and their authors will be found on page 167. The publication of these bulletins, of course, are conditional upon appropriations for this work. Bulletins are distributed to medical officers of the regular corps, reserve corps, and, when conditions permit, to medical officers of the militia. A few are also sent to officers in the naval medical service and to the Public Health Service.

SANITARY TROOPS OF THE ORGANIZED MILITIA.

The following is an extract from the report furnished this office by Maj. Harry L. Gilchrist, Medical Corps, United States Army, detailed for duty in the office of the chief, Division Militia Affairs, War Department:

Considerable improvement in the efficiency of the sanitary troops of the Organized Militia has been noted during the past year in a majority of the States. This improvement has not only been confined to instruction and equipment of the units that have been in the service for some time, but in many cases a complete reorganization of these and the organization of new ones.

Due to many changes which are now being normally made in most States for the purpose of increasing the efficiency of the Organized Militia the work of the commissioned personnel in the sanitary troops is becoming more arduous, which, with the cutting off of important perquisites and privileges, which members of this branch of the service have heretofore been permitted to enjoy, is going to result in many vacancies by resignation and transfer to other branches of the service. Due to this fact it is believed the problem of maintaining an adequate and efficient sanitary corps in the future is going to be difficult and unless immediate steps are taken to make the work more attractive, and members of the sanitary corps extended the same privileges as are those of other branches of the Organized Militia, the result will be a very incomplete and inefficient sanitary corps.

Formerly but few of the States required a strict physical examination of the personnel comprising the Organized Militia; as a result, the medical officers were not called upon to devote so much time to this work. Again, the introduction of the anti-typhoid prophylactic in the Organized Militia has added additional duties to the medical officers, which, with the vaccination of recruits, etc., takes up most of their time. It is impossible in many cases for them to devote any time to the instruction of the members of the sanitary troops. As a result these organizations are deprived of the training of the commissioned medical officers which results in uninstructed and incomplete organizations and much dissatisfaction.

Heretofore the members of the sanitary troops, among whom are many excellent shots, have been permitted to participate in the different shoots, etc., the same as other members of the Organized Militia, but of late this privilege has been taken away from them, resulting in a feeling throughout the sanitary troops that they are not being treated justly.

The fact must not be lost sight of that the majority of men comprising the Organized Militia become affiliated with it at a personal sacrifice; they join the organizations not only from a patriotic standpoint but also for the purpose of diversion. For the line officer this is readily accomplished, but for the medical officer who, after a hard day's work following his professional duties, goes to the armory and is obliged to devote the entire evening to the examination of recruits, to administering the anti-typhoid prophylactic, etc., gets little, if any, change from his daily routine.

THE STRENGTH OF THE SANITARY TROOPS.

The strength of the sanitary troops of the Organized Militia as shown by the annual inspections of 1914 is shown in the table below.

In studying the columns of the following table, it is noted that the majority of the officers and enlisted men of the sanitary troops in many States were not present at the inspections. As a result it is impossible to make any statement concerning these men. Out of a total of 869 commissioned medical officers as shown by the State rosters, 255, or nearly one-third, did not present themselves and were not inspected. Of a total of 3,554 enlisted men carried as members of the sanitary troops of the Organized Militia, 630, or over one-sixth, were absent.

As a result of Circular No. 8, War Department, Division of Militia Affairs, August 1, 1913, many of the smaller detachments have been replaced by larger ones, and many States have organized regimental infirmaries which are complete in all respects.

ORGANIZATION OF THE SANITARY TROOPS IN THE ORGANIZED MILITIA.

Mention was made in my last report of the fact that no uniform organization for the sanitary troops existed; that each State had its own separate and distinct kind, resulting in many different organizations, some of which were good and others not so good.

As a result a form of organization for the medical corps of the Organized Militia, based upon that governing the Medical Corps of the Regular Army, was prepared by this division and furnished to many States, resulting in many cases in its adoption.

Considering that the Organized Militia is receiving Federal support solely for the purpose of forming a trained force subject to the call of the President in time of war, it stands to reason that in order that it may meet this requirement the National Guard should be organized and equipped as nearly like the parent organization as possible.

In some States the opinion still prevails that the only requirements necessary to be successful medical officers are thorough training in medicine and surgery. The knowledge of tactical principles, the methods for the employment of sanitary troops, the transportation of their matériel and supplies, the organization of the different units of different arms, and many other things too numerous to mention are entirely lost sight of.

These statements give a partial idea of the work and responsibilities that will fall to medical officers. If the medical officers are thoroughly trained in all matters pertaining to field service they will be prepared to grasp the situation intelligently; but if, on the other hand, they are untrained, they will not only prove helpless themselves, but to be a great hindrance to others, and may be the cause of a complete change of campaign, thereby turning victory into defeat.

Unfortunately for the Medical Corps, the efficiency of the sanitary troops suffers to a certain extent by reason of the too prevalent idea, not only outside the Army,

but to a certain extent within it, that the purpose of the Medical Department is solely humanitarian, and that the main function of its personnel is like that of doctors in civil life. There is no question but that the knowledge of medicine and surgery the prevention of diseases, and the care of the sick and wounded, are the essential functions of the medical officers; but, on the other hand, to be prepared to carry out these functions successfully in the field requires that medical officers must not only be thoroughly prepared in the above subjects, but they must also be good administrative officers and disciplinarians and familiar with the many and various duties connected with the military profession, all of which require special study and training. In fact, to be successful military doctors requires that they must be military specialists in the art of military science.

It is believed that before training of any kind can be undertaken there must be a uniformity in organization and personnel. Inasmuch as the medical departments of the several States and Territories would be obliged to cooperate with the Medical Department of the Regular Army in time of war, it can be easily seen that to successfully do this they should be organized and instructed along the same lines.

Unfortunately, under the present militia law, the question of organization of the medical department is left entirely to the several States and Territories, with the result that each has its own form of organization, resulting in an utter lack of uniformity. It is believed this condition can be easily remedied, provided the medical officers of the Organized Militia desire to have it done. It may be said with a fair degree of certainty that until a uniform organization of the medical department in the several States and Territories is adopted little can be expected from them in time of need.

MILITIA MEDICAL OFFICERS ATTENDING THE ARMY SERVICE SCHOOLS AT FORT LEAVENWORTH, KANS.

During the year medical officers of the Organized Militia from the States of Oklahoma, Kansas, New York, and Maryland attended the field service school for medical officers at Fort Leavenworth, Kans., and completed the course with credit and received certificates of proficiency. It is to be regretted that more officers could not take advantage of this course. It is believed that the instruction at the school is of inestimable value to the officers of the Organized Militia Medical Corps. Two officers, one from the State of Missouri and the other from Mississippi, attended the course at the Army Medical School and completed it to the entire satisfaction of the faculty.

Of the medical officers of the Organized Militia attending the service schools during the present season, two resigned from the Organized Militia of their respective States immediately upon the completion of the school term, one entering the Marine-Hospital Service, the other the Medical Reserve Corps, active list of the Regular Army. As a result of this their respective States were deprived of the training these men received at the Government schools. Hereafter medical officers of the Organized Militia will not be authorized to attend the service schools unless they express a willingness to remain with the Organized Militia of the States from which they were sent for a period of at least three years.

MEDICAL INSPECTOR-INSTRUCTORS.

During the year five Regular Army medical officers were authorized for duty as inspector-instructors with the Organized Militia, but due to the large demand for medical officers in the Mexican trouble but one has been detailed—Maj. Sanford S. Wadhams, Medical Corps, with the State of New York, and although he has been assigned to this work but a short time the results already achieved are most flattering, and show what can be expected when the remaining inspector-instructors are assigned to this work. It is believed the presence of these officers continuously with the Organized Militia will serve to disseminate correct ideas of field duty, will show the necessity of proper and adequate equipment, will standardize instruction generally, and will secure true progress.

NONCOMMISSIONED OFFICERS OF THE HOSPITAL CORPS.

During the past year noncommissioned officers of the Hospital Corps have been detailed to the States of Massachusetts, Maryland, North Carolina, Alabama, Colorado, and California. Due to the fact that there were no commissioned Regular Army medical inspector-instructors detailed for this work, noncommissioned officers performed this duty. In all cases their services have been very satisfactory and greatly appreciated by the States to which they were assigned.

TYPHOID PROPHYLAXIS.

Inoculation for the prevention of typhoid fever has been carried on quite extensively in the Organized Militia. In view of the wonderful results obtained in the Regular Army and Navy, the Division of Militia Affairs brought the matter to the attention of the Organized Militia, and on numerous occasions strongly recommended its use and administration of the antityphoid prophylactic to all members of the militia. To further encourage the administration of the antityphoid prophylactic all States were notified in the early summer that the serum would be issued from unallotted funds and not charged to the States' allotments. During the year antityphoid vaccine was issued to the following States:

Number of the sanitary personnel and units in the Organized Militia on June 30, 1913, and June 30, 1914.

States.	Medical officers.		Enlisted men.		Field hospitals.		Ambulance companies.		Detachments hospital corps.		Commissioned officers absent, not inspected annual inspection.	Enlisted men absent, not inspected.
	1913	1914	1913	1914	1913	1914	1913	1914	1913	1914		
Alabama	11	16	12	39					1	2	13	12
Arizona	4	4	10	12					1	1	1	4
Arkansas	15	10	25	0					1	0	10	
California	24	27	121	110	1	1	1	1	6	6	8	18
Colorado	12	13	29	74		1			3	1		31
Connecticut	18	18	102	98	1	1	1	1	3	2	5	10
Delaware	3	3	8	10					1	1	1	7
Florida	9	5	20	18					1	1	1	6
Georgia	17	17	33	26		1			5	3	4	5
Idaho	4	6	20	24					1	1	4	9
Illinois	51	48	158	177		1			10	10	15	25
Indiana	19	17	115	106	1	1	1	1	2	2	7	31
Iowa	12	25	77	84	1	1			4	4	11	7
Kansas	7	7	21	25					1	1		9
Kentucky	17	16	48	87	1	1			1	3	4	8
Louisiana	2	10	22	39					1	1		3
Maine	9	9	41	38					2	2	4	22
Maryland	16	18	32	78	1	1				3	6	6
Massachusetts	44	42	146	160	1	1	1	1	11	11	5	28
Michigan	12	29	132	106	1	2	2	2			18	22
Minnesota	17	15	35	49					4	4	2	13
Mississippi	12	12	16	16	1					1	9	15
Missouri	17	26	69	110	1	1	1	1	3	4	13	39
Montana	4	2	24	12					2	1	1	3
Nebraska	20	20	26	88	1	1				2	6	6
New Mexico	3	6	10	17					2	1	1	5
Nevada	0	0	0	0						0		
New Hampshire	7	7	29	32					2	2	2	1
New Jersey	31	31	112	130	1	1			8	7	4	8
New York	110	117	579	581	2	2	3	3	31	28	9	38
North Carolina	22	26	98	59	1	1	1	1	2	2	13	5
North Dakota	4	4	24	23					1	1	2	2
Ohio	48	52	239	242	2	3	2	2	4	9	9	14
Oklahoma	2	11	28	46	1	1				1	2	13
Oregon	12	13	38	32			1	1	1	1	9	10
Pennsylvania	59	53	147	175		1			13	13	14	14
Rhode Island	10	9	32	36	1	1			1	1	1	5
South Carolina	4	11	36	24					1	1	8	3
South Dakota	6	4		22						1	2	5
Tennessee	12	11	95	138	1	1	1	1	4	2	2	74
Texas	4	23	38	57		1			1	1	12	34
Utah	1	3	10	17					1	1		1
Vermont	4	5	18	19					1	1	1	3
Virginia	17	17	59	66					7	4	6	13
Washington	7	7	23	24					1	1	5	16
West Virginia	8	8	25	36					1	2	4	5
Wisconsin	12	15	43	84		1			3	3		4
Wyoming	4	4	21	18					4	3		2
Alaska Territory												
District of Columbia	13	13	48	75		1			1	2		10
Hawaii	3	4	10	15					1	1	1	6
Porto Rico												
Total	779	869	3,104	3,554	20	28	15	15	155	156	255	630

CONSTRUCTION AND REPAIR OF HOSPITALS.

During the past year plans and specifications were prepared and contracts were entered into for the construction of new hospital buildings at Fort Shafter, Hawaii, being an isolation ward for contagious diseases, an operating pavilion, and a Hospital Corps dormitory; a ward for special cases for the Letterman General Hospital, San Francisco, Cal.; an additional ward and two additional stories on the mess room and kitchen for the Walter Reed General Hospital, Takoma Park, D. C.; and a garage, improvements for the men's bathhouse, an addition to the officers' bathhouse, and a hydrotherapeutic outfit for the Army and Navy General Hospital, Hot Springs, Ark.

The following buildings, which were contracted for during the fiscal year ending June 30, 1913, have been completed: Isolation wards at Fort Bliss, Tex., and Fort Oglethorpe, Ga.; dormitories at the Army and Navy General Hospital, Hot Springs, Ark., and the Letterman General Hospital, San Francisco, Cal., for the Army Nurse Corps; a hydrotherapeutic plant and an additional ward at the Walter Reed General Hospital, Takoma Park, D. C.; a hydrotherapeutic ward, a sterilizing and disinfecting building, and an addition to the detention ward at the Letterman General Hospital, San Francisco, Cal.; and additional wards to the hospitals at Fort Bliss, Tex., Fort Huachuca, Ariz., and Fort Shafter, Hawaii; also additions and improvements to the hospitals at Fort H. G. Wright, N. Y., Fort Monroe, Va., Fort Sill, Okla., and Fort D. A. Russell, Wyo.; and a small temporary hospital at Camp Yosemite, Cal.

An allotment of $51,000 was made from the appropriation for construction and repair of hospitals for use in the Philippine Department during the fiscal year, and $1,500 from the appropriation for quarters for sergeants, first class, Hospital Corps, to cover the cost of quarters for these noncommissioned officers in the Philippines.

In addition to the foregoing, the Army general hospitals and the hospitals at military posts were improved or kept in proper repair so far as funds would permit.

The Army and Navy General Hospital, Hot Springs, Ark., has been improved in a manner to meet some of the most urgent necessities. A Hospital Corps barrack building is required to house the attendants, and a storehouse is needed to protect Government property. These buildings will probably be provided from the appropriation for construction and repair of hospitals for the fiscal year 1915.

As stated in previous reports new and modern hospitals should be erected at the following military posts in the near future:

Fort McPherson, Ga.—The hospital at this post is in size entirely inadequate. It is located in close proximity to a railroad and has no cellar except a small excavation for a heating apparatus, which was made some years after the building was erected. The heating and ventilation are not suitable for a modern hospital. The plumbing is crude, and efforts have been made from time to time to improve it, but it falls far short of meeting the modern sanitary requirements. The operating room is located in a small annex, with a small laboratory adjoining. There is no instrument room, etherizing room, preparation rooms, nor surgical ward. There is no suitable ward for the isolation of contagious diseases, nor prison ward; and the Hospital

Corps detachment is quartered in an old temporary wooden building which was erected for use as a ward during the Spanish-American War. The mess room and kitchen are too small and are unsuited for their purpose, it being necessary to set tables two or three times to accommodate the patients. The entire hospital is such that it would be in the interest of economy to replace it with a modern structure. A hospital should be erected with a capacity of 87 beds for patients, necessary attendants, noncommissioned officers, etc. The estimated cost of such a building is $90,000.

Fort Hamilton, N. Y.—In 1904 the commanding officer of this post stated that the present hospital was entirely inadequate for the needs of the garrison; that there was insufficient space for attendants; that there was no isolation ward nor prison ward; and that in the rearrangement of the post a better site had been selected. In 1906 the chief surgeon, Department of the East, stated that the hospital was very badly located, standing on rather low ground facing at a distance of 14 yards a noisy public highway, on the other side of which were saloons and other objectionable places of public resort. In view of these circumstances, the interests of the service will best be subserved by erecting a modern hospital on a more appropriate site, especially as it is proposed to use the present building for a band barrack. A hospital of sufficient capacity for this post should contain 60 beds for patients, necessary attendants, noncommissioned officers, etc. The estimated cost of such a building is $60,000.

Fort Dade, Fla.—In 1910 the surgeon at this post recommended that a new modern hospital be erected, and stated:

> The kitchen and dining room are near the center of the building, and it is necessary to pass through them in going from the operating room to the ward. The ward is too small, and quarters for Hospital Corps men are inadequate. It is not believed that the present structure can be remodeled to meet the requirements of a modern hospital.

The commanding officer added:

> The building was poor enough when this was a one-company post, but now that it is garrisoned by two companies, and is designed to be the largest post of the district, it is totally inadequate.

The present hospital is entirely inadequate and unsuitable. It is a temporary structure with crude plumbing, lacks modern appliances, and the conditions are such that they can only be remedied by the erection of a new and modern hospital. A suitable building is estimated to cost $30,000.

Fort Logan H. Roots, Ark.—The hospital at this post is in accordance with modified plans for a two-story hospital, as shown in Circular No. 10, Surgeon General's Office, 1877, with no cellar, and heated by stoves. It has one ward for 12 beds on the second floor. In 1900 the surgeon stated that settling of the building caused the plastering to crack in numerous places. A small cellar was provided in an outbuilding for a heating plant. In 1904 the surgeon stated that the furnace was unsatisfactory in its location, being so far removed from the main building that the necessary heating pipes had to be laid under the porches and the open foundation of the hospital, and this caused the loss of so much of the heat generated that it was almost impossible to keep the temperature up to the proper degree during cold weather.

In 1909 the Inspector General of the Army said the hospital at Fort Logan H. Roots, Ark., "needs the additions of isolation ward, store-

room, prison ward, and sleeping quarters for Hospital Corps men," and the chief surgeon said, "No amount of addition, extension, or alterations can make it what it should properly be, and a new, modern one will really be a saving to the Government." The Quartermaster General of the Army recommended that no further action be taken toward the enlargement of the present hospital, but that an entirely new hospital be constructed as soon as funds are available from the appropriation for construction and repair of hospitals.

If this post is to be permanent, a new and modern hospital of sufficient capacity should be erected. Such a building, owing to location, cost of material, etc., is estimated to cost $50,000.

Presidio of San Francisco, Cal.—The hospital at this post, with the exception of a small portion used as a dispensary, has not been occupied since 1905. It was erected during the Civil War, has been unsuitable for hospital purposes for years, and is not properly located for use as a dispensary. A modern dispensary building is desired at this post, in a suitable location. It is recommended that the old hospital be abandoned and that those requiring treatment be sent, as at present, to the Letterman General Hospital. It would require a large expenditure of funds to modernize the old hospital and render it suitable for modern hospital purposes, and it would be more economical to erect a new building. A suitable dispensary is estimated to cost $25,000.

Fort Benjamin Harrison, Ind.—One ward wing and the administration building of a modern hospital have been erected at this post, but the building has not been completed. It lacks one ward wing and a rear annex. It is insufficient in capacity, and in March, 1909, the surgeon recommended that the hospital accommodations at this post be doubled. The chief surgeon of the department stated: "It is important that the hospital at Fort Benjamin Harrison be completed at an early date, as the hospital facilities are inadequate even for the regular garrison, and are entirely so when the post is used as a base for the maneuver camp. One wing and the annex are yet lacking, and in fact, less than half of the hospital has been completed."

The department commander stated that this hospital should be completed by adding another wing and the rear annex required for the standard plan for a 60-bed hospital. To complete this building in the manner recommended is estimated to cost $60,000.

Fort Crook, Nebr.—The hospital at this post is inadequate. It lacks a suitable kitchen, mess room, Hospital Corps dormitory, prison ward, isolation ward, etc. It is purposed to add a rear annex to contain these rooms, thus relieving the administration building, and providing more room for patients, clerical work, etc. The estimated cost of a rear annex is $30,000.

Fort Niagara, N. Y.—The hospital at this post has 13 beds. The garrison is to consist of 9 companies of Infantry. This will require hospital accommodations for 32 patients, 15 Hospital Corps privates, and 4 noncommissioned officers. It is proposed to enlarge this hospital by adding another ward for 12 beds, and a rear annex to contain kitchen, mess hall, Hospital Corps dormitory, prison ward, isolation ward, etc. The estimated cost of these improvements is $40,000.

Hawaiian Islands.—Six new buildings are in course of erection for the department hospital at Fort Shafter. When completed they will

probably supply sufficient hospital accommodations for some years. An officers' ward and a Nurse Corps dormitory are necessary to complete the requirements, and it may be possible to supply funds for these buildings from the appropriation for construction and repair of hospitals, fiscal year 1915.

General Hospital, Fort Bayard, N. Mex.—Authority was given to erect three additional ward buildings for this general hospital, but it was possible to enter into contract for the erection of only two of these wards. To erect the third ward building $50,000 is needed.

San Juan, P. R.—In 1907 Congress appropriated $60,000 to build a modern hospital at this post, but owing to a contemplated transfer of buildings by the insular government to the War Department, this hospital was not erected, and the funds were returned to the United States Treasury.

The surgeon in 1913 invited attention to the unsuitability of the present hospital building for the purpose for which it is used, and the need for the erection of a modern structure.

No funds are available for the repair of this old building, as it belongs to the insular government, and if it should be decided to erect a new hospital it will be necessary for Congress to reappropriate the funds originally authorized.

Owing to the increase in Coast Artillery, and the concentration of companies at various posts, it has been necessary to increase the hospital accommodations by enlarging the buildings. This has been done at several posts, but it is estimated that $50,000 will be required for additions, repairs, and improvements.

Fort Leavenworth, Kans.—The hospital at this post consists of a group of buildings heated by separate heating systems, some water and some steam, which require 10 fires to be kept up, including those for heating water, etc. The surgeon states that some of these plants are inefficient, at all times dirty, and labor wasting to an extraordinary degree. He recommends the installation of a central plant for steam heating, so connected up as to supply heat for all buildings composing hospital administration. This recommendation is believed to be in the interest of true economy, and the installation of a central steam-heating plant is recommended.

Philippine Islands.—As the Philippine Islands contain nearly one-fourth of the Army, and a very large number of posts, many of which require large expenditures, $50,000 is estimated as a portion of what is required. The chief surgeon stated that $151,000 is the amount estimated as necessary to complete the hospital at Fort William McKinley, that the garrison will be approximately 7,200 troops of all arms, except Coast Artillery, and that a hospital of 300 beds will be required. The funds estimated for are to cover requirements in the entire islands. They will not be sufficient, but will cover the necessary repairs.

Army Medical School.—The Army Medical School occupies a rented building in the city of Washington, at a rental of $8,680 per annum. As it is one of the permanent service schools it would be much more economical, as well as more fitting and convenient, for it to be housed in buildings erected by the Government. It is proposed to locate these on the tract of land occupied by the Walter Reed General Hospital, so that the students may have the clinical

advantages and the instruction in administration afforded by the hospital, and that the hospital may enjoy the laboratory conveniences of the school. These buildings are estimated to cost $350,000.

Walter Reed General Hospital.—This is one of four general hospitals, and is located in the District of Columbia. It is one of the most important, and is used for the treatment of officers, retired officers, patients from Washington Barracks, enlisted men, special cases, observation of patients under consideration for discharge on account of disability, and for the education of students attending the Army Medical School. New buildings and additions have been erected from time to time. A new one-story ward has lately been added to the west end of this hospital, and a similar ward is now being added to the east end. These two ward wings require additional stories on each to complete them. The additional room is necessary, and these improvements are estimated to cost $80,000.

Quarters for sergeants, first-class, Hospital Corps.—Owing to the limited appropriation for these buildings, it was not possible to erect additional quarters, and various necessary additions and improvements had to be disallowed. A number of large military posts are in need of such quarters for these noncommissioned officers, and the appropriation should be liberal until such time as the Hospital Corps sergeants are supplied with suitable habitations. Ten single sets and six double sets of these quarters are needed, but only the most necessary are included in the estimate.

Estimates for new construction which is essential to the proper care of the sick have been for some years lopped off of the estimates in accordance with the instructions of the Secretary of War in order to reduce the War Department estimates until the necessities of the department, in this respect, have become very urgent and have accumulated to a large total. The following are the items which are considered to be most necessary, and are accordingly included in the estimate laid before the Secretary for the fiscal year 1916:

Hospitals:	
Fort McPherson, Ga.	$90,000
Fort Hamilton, N. Y.	60,000
To enlarge and improve hospitals at Artillery posts	50,000
Enlargement of hospitals:	
Fort Crook, Nebr.	30,000
Fort Niagara, N. Y.	40,000
Construction and repair, Philippine Islands	50,000
Additions and repairs, general hospitals	80,000
Repairs, hospitals, all parts in the United States	200,000
Total for construction and repair of hospitals	600,000
Sergeants' quarters:	
Four single sets, new quarters	20,000
One double set, new quarters	10,000
Philippine Islands, repairs, etc.	5,000
Repairs, all parts in the United States	17,000
Total for Hospital Corps sergeants' quarters	52,000

MEDICAL AND HOSPITAL SUPPLIES.

The appropriation made by Congress for the fiscal year 1914 for the support of the Medical Department was $750,000, this being the amount asked for in the estimates submitted by the honorable the

Secretary of War. A deficiency appropriation of $50,000 was also obtained from Congress for the purchase of emergency supplies to be used on the Texas border and at Vera Cruz.

During the past years the department has accumulated a quantity of field supplies which has been placed in stock for use in active campaign; but during 1913 no further stores were added to this accumulation, as it was believed to be sufficient to meet the first call for troops in the case of a war of considerable magnitude. The wisdom of thus accumulating a supply of field material was well illustrated during the recent mobilization of troops for Mexico, when this reserve was called upon for the first outfitting of the troops. The amount expended for field supplies during the year was $155,257.98.

Medical supply depots have been maintained at the same points at which they were maintained during the previous fiscal year, and the service of supply has been very satisfactorily met.

During the year a number of motor trucks of lighter type than those previously purchased have been obtained and, in the main, have been fitted with standard Army ambulance bodies. These are now being tried out at various posts, but the whole matter is as yet in the experimental stage and undoubtedly changes will be made in the future.

No new portable X-ray machines have been obtained during the year This type of machine, at the best, is of limited capacity in its present state of evolution, and the more complete transformer machine for permanent posts has been furnished wherever it was possible to do so.

The revision of the supply table is now under way. Certain items will be stricken therefrom and others added. The allowances will also be changed in some instances, and the whole outline of the supply tables will be made to fit more accurately with the supplies issued.

ARTIFICIAL LIMBS AND APPARATUS.

Under laws relating to artificial limbs and apparatus, or commutation therefor, orders on manufacturers were given during the fiscal year for 15 legs and 1 arm. Commutation certificates were issued for 141 cases of amputated leg, 66 of amputated arm, 9 of amputated foot, and 1,163 cases of loss of use of limb.

Under the act of June 17, 1870, and subsequent amendments thereto 23,624 disabled soldiers and sailors have been furnished artificial limbs or apparatus or have received commutation in money since the passage of the act as follows: Total number benefited to June 30, 1914, 23,624; died, 14,606; dropped from rolls, 592; remaining on rolls at end of fiscal year, 7,855, being a loss of 337 beneficiaries during the year. It is estimated that the sum of $95,000 will be required to pay the claims coming due during the fiscal year ending June 30, 1916.

APPLIANCES AND TRUSSES.

One hundred and twenty appliances were issued during the fiscal year and 269 trusses were furnished and fitted.

LIBRARY OF THE SURGEON GENERAL'S OFFICE.

During the year 477 books and 4,625 pamphlets and journals were presented to the library. The following table shows the additions made to the library during the fiscal year 1913–14:

	On hand June 30, 1913.	Added during fiscal year.	Total June 30, 1914.
Medical journals	57,957	1,376	59,333
Medical transactions	8,830	47	8,877
Bound theses	2,649	.....	2,649
Bound pamphlets	3,127	.....	3,127
Other medical books	109,969	1,882	111,851
Unbound volumes	.....	.....	33,657
Total	182.532	3,305	219,494
Medical theses	92,762	2,961	95,723
Medical pamphlets	229.887	4,710	234,597
Total	322,649	7,671	330,320

Volume XIX of the Index Catalogue is in the course of preparation and will appear in due time. It includes the important subject of "Uterus" and its subdivisions, which will half fill the volume.

The recommendation made last year and the year before that two translators be provided, at a salary of $1,800, in lieu of two clerks of class 2 is urgently repeated.

The change, which would only add $800 per annum to the salary list, is deemed very necessary for the future welfare of the library. It would provide for two much-needed specialists at a reasonable salary and, in case of vacancy, make it possible to apply directly to the Civil Service Commission for men with a knowledge of several foreign languages, and in addition either a special training in bibliography or medicine, or both. At present the loss of a qualified clerk of the higher grade, experienced in library work, a graduate in medicine, or a bibliographer, results, consequent upon the promotions in the Surgeon General's Office, in a vacancy in the grade of clerk at $1,000, and it is hopeless to expect to obtain a specially trained man at such a low salary.

ARMY MEDICAL MUSEUM.

The total number of specimens in the museum at the close of the fiscal year 1914 was 47,120.

The following statement shows the number of specimens in the different sections:

Pathological section	13,079
Anatomical section	1,233
Comparative anatomy	622
Microscopical section	12,916
Miscellaneous section	3,895
Provisional anatomical section	360
Photographic section	3,255

The following are some of the more interesting specimens received during the year ending June 30, 1914:

Malformation.—Specimen 14337, an epignathus human male fetus at about the sixth month. The mother had no children. Contributed by Dr. W. S. Bowen, Washington, D. C. Specimen 14346, thoracopagus; from a woman, age 19, primipara, monster said to have been extracted without laceration of mother. Contributed by Surg. C. C. Pierce, United States Public Health Service. Specimen 14353, supernumerary toe in Egyptian mummy. Contributed by Dr. W. S. Disbrow, Newark, N. J.

Ectopic pregnancy.—Specimen 14332. The fetus and placenta were mummified; removed by operation. There appeared to have been both intrauterine and extrauterine pregnancy. (See Amer. Jour. Obstet., March, 1914, p. 506.) Contributed by Dr. J. W. Bovee, Washington, D. C.

Sequel of typhoid fever.—Specimen 14333, necrosis of cartilages of larynx. From an Army officer; death by suffocation; tracheotomy by Lieut. T. J. Leary, Medical Corps, United States Army. Contributed by Col. H. J. Birmingham, Medical Corps, United States Army.

Experimental scurvy.—Specimen 14377, experiments on guinea pigs; bones light and friable; epiphyses separated from shafts; hemorrhage at epiphysal lines, etc. Contributed by Board for Study of Tropical Diseases.

Synostosis of maxilla and mandible, unilateral, probably congenital. Specimen 14376, from a child that died at about 13 months, practically from starvation. Contributed by Dr. W. H. Atkinson, Washington, D. C.

Fracture.—Specimen 14352, fissures of head and face. From a Moro, who "ran amuck," and was himself killed by a bolo. Contributed by Maj. E. L. Munson, Medical Corps, United States Army

Cartilages.—Specimens 14340–14343, pigmentation. Same case as 14338, infra, pigmentation of aorta. Contributed by Capt. A. T. Cooper, Medical Corps, United States Army.

Gangrene.—Specimen 14384, gangrene of finger from bite. From Moro woman bitten by another Moro; amputation. Contributed by

Lieut. J. L. Robinson, Medical Corps, United States Army. Specimen 14391, gangrene of toes; diabetic; amputation. Contributed by Lieut. Col. J. D. Glennan, Medical Corps, United States Army.

Tuberculoma of cerebellum.—Specimen 14344. Removed after death. Contributed by Dr. R. M. Randolph, Washington, D. C.

Aorta.—Specimens 14338–14339, pigmentation, from a soldier who had granular kidneys with chronic albuminuria. Similar pigmentation in other parts of the body. (See cartilages, 14340, supra.) Contributed by Capt. A. T. Cooper, Medical Corps, United States Army.

Mediastinal glands and lungs.—Specimen 14387, round celled sarcoma, from a soldier, age about 25. The disease probably primary in the glands, and secondary in the lungs; he had also diffused parenchymatous nephritis. Contributed by Lieut. Col. E. B. Frick, Medical Corps, United States Army.

Spleen.—Specimen 14378, stab wound, from a Moro, age about 25, who died on the sixth day from hemorrhage and peritonitis. Contributed by Lieut. J. L. Robinson, Medical Corps, United States Army.

Submandibular gland.—Specimen 14388, foreign body. From a soldier. A straw of grass entered Wharton's duct while the soldier was chewing. Gland removed by operation. Contributed by Capt. W. H. Smith, Medical Corps, United States Army.

Oesophagus.—Specimen 14379, slough 4 inches long. From a soldier who had pharyngo-oesophago-gastritis after eating canned fish; also chronic nephritis. Gastrostomy was done twice by Lieut. T. J. Leary, Medical Corps, United States Army. Death. Same case as the nephrectomy, infra 14349. Contributed by Capt. Chas. F. Craig, Medical Corps, United States Army.

Liver.—Specimen 14368, carcinoma. The liver weighed 9 pounds 10 ounces. From a soldier, age 36. The primary disease was in the bladder; infra 14367. Contributed by Lieut. Col. H. C. Fisher, Medical Corps, United States Army.

Pancreas.—Specimen 14375, carcinoma; from a soldier, age 40; had secondary carcinoma of liver. Contributed by Lieut. Col. J. D. Glennan, Medical Corps, United States Army.

Intestine.—Specimen 14386, laceration. From a Chinaman, age about 35. A heavy box struck him on the abdomen; died from peritonitis 36 hours afterwards. Contributed by Maj. G. McD. Van Poole, Medical Corps, United States Army.

Peritoneum.—Specimen 14355, carcinoma. The tumor mass weighed 50 pounds, and was not operable. From an Army officer who had ascites for which he was tapped many times. Exploratory laporotmy by Maj. T. L. Rhoads, Medical Corps, United States Army. Contributed by Lieut. Col. H. C. Fisher, Medical Corps, United States Army.

Kidney.—Specimen 14369, atrophy, dilated pelvis. From a soldier who had chronic interstitial nephritis. Kidney removed after death. Contributed by Lieut. Col. J. D. Glennan, Medical Corps, United States Army.

Pyonephrosis.—Specimen 14349, same case as slough of oesophagus, supra, 14379. From soldier, age 23, who had had gonorrhea; nephrectomy by Capt. W. H. Moncrief, Medical Corps, United States Army.

Bladder.—Specimen 14367, primary carcinoma. From a soldier, age 36; secondary carcinoma of liver, 14368, supra. Contributed by Lieut. Col. H. C. Fisher, Medical Corps, United States Army.

Testicle.—Specimen 14350, gummata. From a civilian, age 39, who had had a chancroid and gonorrhea but denied syphilis, and the Wassermann reaction was doubtful. Testicle removed by operation. Contributed by Capt. W. A. Wickline, Medical Corps, United States Army.

Ovary.—Specimen 14336, fibro-cystic tumor, weighing 6 pounds 9 ounces. From an unmarried woman, age 52, who had not had symptoms, except the presence of the mass. Removed by Dr. J. T. Kelley, jr., Washington, D. C. Contributed by Dr. D. C. Chadwick, Washington, D. C.

DENTAL AND ORAL DISEASES.

TABLE NO. 47.—*Dental and oral diseases, year 1918, officers and enlisted men.*

	Cases admitted to treatment.		Operations performed.	
	Number.	Ratio.	Number.	Ratio.
United States (continental), exclusive of Alaska	50,386	803.23	55,692	887.82
Philippine Islands	13,815	815.53	16,259	959.80
Hawaii	7,167	1,120.19	6,456	1,009.07
Canal Zone, Panama	1,336	1,588.59	1,962	2,332.94
China	1,534	1,215.53	1,625	1,287.63
Alaska	818	681.10	944	786.01
Porto Rico	1,112	1,753.94	1,525	2,405.36
Total	76,168	846.26	84,463	938.43

DENTAL CARIES—NUMBER OF TEETH TREATED.

	White troops.		Colored troops.		Philippine Scouts.		Porto Rican native troops.		Total.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
United States (continental), exclusive of Alaska	27,255	446.56	254	149.76	.....	.....	.....	.....	27,509	438.54
Philippine Islands	6,058	603.81	828	457.21	1,079	211.73	.....	.....	7,965	470.19
Hawaii	3,595	671.96	569	542.94	.....	.....	.....	.....	4,164	650.83
Canal Zone, Panama	794	944.12	.....	.....	.....	.....	.....	.....	794	944.12
China	830	657.69	.....	.....	.....	.....	.....	.....	830	657.69
Alaska	569	473.77	.....	.....	.....	.....	.....	.....	569	473.77
Porto Rico	.....	.....	.....	.....	.....	.....	472	744.48	472	744.48
Total	39,101	490.48	1,651	362.46	1,079	211.73	472	744.48	42,303	470.01

RECRUITING.

AMERICAN TROOPS.

The movement of recruits is shown in Table No. 48. Each recruit, before enlistment, was given a thorough examination by a medical officer of the Army. There were 36,822 examined, as compared with 32,738 for the preceding year. Of each 1,000 examined, 134.49 were rejected and 30.85 declined enlistment, as compared with 120.96 and 23.86 for 1912. Of each 1,000 examined by medical officers, 834.66 were accepted, as compared with 855.18 for 1912. Of the number examined and enlisted, 287.60 per 1,000 were reenlistments and 547.06 were original enlistments, as compared with 308.51 and 546.67 for 1912.

TABLE NO. 48.—*Movement of recruits, white and colored, 1913.*

	White.		Colored.		Total.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Examined by medical officers	33,828	1,000.00	2,994	1,000.00	36,822	1,000.00
Accepted by medical officers	28,130	831.56	2,604	869.74	30,734	834.66
By first enlistment	18,319	541.53	1,825	609.55	20,144	547.06
By all other enlistments	9,811	290.03	779	260.19	10,590	287.60
Rejected by medical officers	4,594	135.80	358	119.57	4,952	134.49
Declined	1,104	32.64	32	10.69	1,136	30.85

TABLE NO. 49.—*Nativities of accepted recruits, American Army, 1913.*

Country of birth.	Accepted recruits, 1913.		Country of birth.	Accepted recruits, 1913.	
	Number.	Ratio per 1,000 of total accepted.		Number.	Ratio per 1,000 of total accepted.
United States—			Scotland	70	2.28
White	23,600	767.88	Turkey	54	1.76
Colored	2,604	84.73	Holland	44	1.43
Total native born	26,204	852.61	Switzerland	42	1.37
Germany	813	26.45	Greece	38	1.24
Russia	804	26.16	Roumania	37	1.20
Austria	612	19.91	France	33	1.07
Ireland	571	18.58	Australia	17	.55
England	317	10.31	est Indies	15	.49
Italy	252	8.20	Belgium	13	.42
Hungary	234	7.61	Others	61	1.98
Scandinavia	198	6.44	Total foreign born	4,530	147.39
Canada	191	6.21	Grand total	30,734	1,000.00
Denmark	114	3.71			

More of our recruits are Germans and Russians than last year, these two countries furnishing of our new soldiers for the year, 52.61 per 1,000. Austria now gives us more recruits than Ireland.

TABLE NO. 50.—*Ages of recruits, white and colored, and the proportion at each age per 1,000 accepted.*

Age.	White.		Colored.		Total.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
18 years and under	1,704	60.58	127	48.77	1,831	59.58
19 years	1,326	47.14	131	50.31	1,457	47.41
20 years	648	23.04	77	29.57	725	23.59
21 years	5,641	200.53	426	163.59	6,067	197.40
22 years	3,355	119.27	304	116.74	3,659	119.05
23 years	1,859	66.09	216	82.94	2,075	67.51
24 years	1,854	65.91	151	57.99	2,005	65.24
25 years	1,431	50.87	133	51.08	1,564	50.89
26 years	1,142	40.60	111	42.63	1,253	40.77
27 years	1,162	41.31	91	34.95	1,253	40.77
28 years	948	33.70	80	30.72	1,028	33.45
29 years	769	27.34	79	30.34	848	27.59
30 years	806	28.44	64	24.58	864	28.11
31 years	623	22.15	66	25.35	689	22.42
32 years	563	20.01	59	22.66	622	20.24
33 years	561	19.94	58	22.27	619	20.14
34 years	492	17.49	64	24.58	556	18.09
35 years	402	14.29	52	19.97	454	14.77
36 years	368	13.08	57	21.89	425	13.83
37 years	345	12.26	32	12.29	377	12.27
38 years	296	10.52	26	9.98	322	10.48
39 years	271	9.63	29	11.14	300	9.76
40 years and over	1,570	55.81	171	65.67	1,741	56.65
Total	28,130	1,000.00	2,604	1,000.00	30,734	1,000.00

The proportion of accepted recruits, 24 years of age and under, was 579.78, as against 609.06 in 1912. As for several years past 21 and 22 years were the ages at which most enlistments are made.

TABLE NO. 51.—*Relation of height to age.*

ABSOLUTE NUMBERS—WHITE RECRUITS, 1913.

Heights.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years	22 years.	23 years.	24 years.	25 years.	26 years and over.	
5 feet 1 inch and under							1		3	4
5 feet 2 inches	3	1	2	4	4	1			17	32
5 feet 3 inches	21	31	18	75	48	32	16	18	104	363
5 feet 4 inches	143	102	45	358	200	123	111	97	641	1,820
5 feet 5 inches	262	152	89	561	328	177	210	153	1,079	3,011
5 feet 6 inches	335	235	115	838	481	292	275	249	1,582	4,402
5 feet 7 inches	294	264	103	1,023	598	285	318	212	1,791	4,888
5 feet 8 inches	299	221	91	936	547	304	313	236	1,722	4,669
5 feet 9 inches	174	135	78	803	456	251	250	172	1,349	3,668
5 feet 10 inches	93	96	54	487	318	180	165	132	890	2,415
5 feet 11 inches	46	41	30	286	198	118	89	77	537	1,422
6 feet	27	27	20	192	104	70	74	49	404	967
6 feet 1 inch	4	13	3	48	41	12	19	21	114	275
6 feet 2 inches and over	3	8		30	32	14	13	15	79	194
Total	1,704	1,326	648	5,641	3,355	1,859	1,854	1,431	10,312	28,130

TABLE No. 51.—*Relation of height to age*—Continued.

PROPORTIONAL NUMBERS—WHITE RECRUITS, 1913.

Heights.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
5 feet 1 inch and under	.....	.....	.....	.....	.....	.....	0.54	.....	0.29	0.14
5 feet 2 inches	1.76	0.75	3.09	0.71	1.19	0.54	.....	.....	1.65	1.14
5 feet 3 inches	12.32	23.38	27.78	13.30	14.30	17.21	8.63	12.58	10.09	12.90
5 feet 4 inches	83.92	76.92	69.44	63.46	59.62	66.16	59.87	67.78	62.17	64.70
5 feet 5 inches	153.76	114.63	137.35	99.45	97.76	95.21	113.27	106.92	104.64	107.04
5 feet 6 inches	196.60	177.22	177.47	148.56	143.37	157.07	148.33	174.00	153.41	156.49
5 feet 7 inches	172.54	199.09	158.95	181.35	178.24	153.31	171.52	148.14	173.68	173.76
5 feet 8 inches	175.47	166.67	140.43	165.93	163.04	163.53	168.82	164.92	166.99	165.98
5 feet 9 inches	102.11	101.81	120.37	142.35	135.92	135.02	134.85	120.20	130.82	130.39
5 feet 10 inches	54.58	72.40	83.33	86.34	94.78	96.83	89.00	92.24	86.31	85.85
5 feet 11 inches	27.00	30.92	46.30	50.70	59.02	63.48	48.01	53.81	52.08	50.55
6 feet	15.85	20.36	30.86	34.04	31.00	37.65	39.93	34.24	39.18	34.38
6 feet 1 inch	2.35	9.80	4.63	8.51	12.22	6.46	10.25	14.68	11.06	9.78
6 feet 2 inches and over	1.76	6.03	.....	5.32	9.54	7.53	7.01	10.48	7.66	6.90
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

TABLE No. 52.—*Relation of height to age.*

ABSOLUTE NUMBERS—COLORED RECRUITS, 1913.

Heights.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
5 feet 1 inch and under	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5 feet 2 inches	1	.....	.....	.....	.....	.....	1	.....	.....	2
5 feet 3 inches	2	4	3	5	4	2	3	1	13	37
5 feet 4 inches	11	18	6	32	12	16	13	12	59	179
5 feet 5 inches	20	18	9	59	37	22	18	15	109	307
5 feet 6 inches	17	29	14	67	54	28	18	15	175	417
5 feet 7 inches	27	18	9	67	54	47	22	18	186	448
5 feet 8 inches	19	15	12	57	42	27	32	25	189	418
5 feet 9 inches	13	8	12	63	38	31	20	16	108	309
5 feet 10 inches	11	8	7	39	29	20	12	18	90	234
5 feet 11 inches	4	6	1	18	20	11	4	5	42	111
6 feet	2	4	3	13	12	8	5	3	47	97
6 feet 1 inch	.....	2	.....	4	2	3	2	3	15	31
6 feet 2 inches and over	.....	1	1	2	.....	1	1	2	6	14
Total	127	131	77	426	304	216	151	133	1,039	2,604

PROPORTIONAL NUMBERS—COLORED RECRUITS, 1913.

5 feet 1 inch and under	.....	.....	.....	.....	.....	.....	6.62	.....	.....	0.77
5 feet 2 inches	7.87	.....	.....	.....	.....	.....	.....	.....	.....	.....
5 feet 3 inches	15.75	30.54	38.96	11.74	13.16	9.26	19.87	7.52	12.51	14.21
5 feet 4 inches	86.62	137.40	77.92	75.12	39.47	74.07	86.09	90.23	56.79	68.74
5 feet 5 inches	157.48	137.40	116.88	138.50	121.71	101.85	119.21	112.78	104.91	117.90
5 feet 6 inches	133.86	221.37	181.82	157.28	177.63	129.63	119.21	112.78	168.43	160.14
5 feet 7 inches	212.60	137.40	116.88	157.28	177.63	217.59	145.70	135.34	179.02	172.04
5 feet 8 inches	149.61	114.50	155.84	133.80	138.16	125.00	211.92	187.97	181.90	160.52
5 feet 9 inches	102.36	61.07	155.84	147.89	125.00	143.52	132.45	120.30	103.95	118.66
5 feet 10 inches	86.61	61.07	90.91	91.55	95.39	92.59	79.47	135.34	86.62	89.86
5 feet 11 inches	31.48	45.80	12.99	42.25	65.79	50.93	26.49	37.59	40.42	42.63
6 feet	15.75	30.54	38.96	30.52	39.47	37.04	33.11	22.56	45.24	37.25
6 feet 1 inch	.....	15.27	.....	9.39	6.58	13.89	13.25	22.56	14.44	11.90
6 feet 2 inches and over	.....	7.63	12.99	4.69	.....	4.63	6.62	15.04	5.77	5.38
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

It will be noted that 48.38 per cent of the white recruits were 5 feet 8 inches or over, and 1.42 per cent were under the minimum height of 5 feet 4 inches, as compared with 49.65 and 1.01, respectively, for the previous year.

For colored troops 46.62 were 5 feet 8 inches or over, and 1.50 per cent were under the minimum height, as compared with 46.26 and 0.78 last year.

The average height for recruits was 5 feet 7.54 inches as compared with 5 feet 7.57 inches in 1912.

TABLE No. 53.—*Relation of weight to age.*

ABSOLUTE NUMBERS—WHITE RECRUITS, 1913.

Weights.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
119 pounds and under	109	58	31	112	43	31	26	11	159	580
120 to 124 pounds	320	176	82	454	228	106	92	73	382	1,913
125 to 129 pounds	327	250	112	677	326	156	149	119	658	2,774
130 to 134 pounds	280	234	96	785	415	237	220	170	994	3,431
135 to 139 pounds	225	180	95	841	497	240	270	198	1,144	3,690
140 to 144 pounds	174	151	80	811	527	309	276	202	1,225	3,755
145 to 149 pounds	115	118	56	648	437	221	201	170	1,148	3,114
150 to 154 pounds	84	68	34	537	304	201	185	151	1,095	2,659
155 to 159 pounds	34	35	31	341	221	132	153	112	849	1,908
160 to 164 pounds	12	35	14	189	152	88	98	81	672	1,341
165 to 169 pounds	7	7	9	108	95	52	70	59	521	928
170 to 174 pounds	8	8	3	61	49	39	44	27	360	599
175 to 179 pounds	6	4	2	45	26	21	28	27	308	467
180 pounds and over	3	2	3	32	35	26	42	31	797	971
Total	1,704	1,326	648	5,641	3,355	1,859	1,854	1,431	10,312	28,130

PROPORTIONAL NUMBERS—WHITE RECRUITS, 1913.

119 pounds and under	63.97	43.74	47.84	19.85	12.82	16.68	14.02	7.69	15.42	20.62
120 to 124 pounds	187.79	132.73	126.54	80.48	67.96	57.02	49.62	51.01	37.04	68.01
125 to 129 pounds	191.90	188.52	172.84	120.01	97.17	83.92	80.37	83.16	63.82	98.61
130 to 134 pounds	164.32	176.48	148.15	139.16	123.70	127.49	118.66	118.80	96.40	121.97
135 to 139 pounds	132.04	135.75	146.60	149.09	148.14	129.10	145.63	138.36	110.94	131.18
140 to 144 pounds	102.11	113.88	123.46	143.77	157.08	166.22	148.87	141.16	118.79	133.49
145 to 149 pounds	67.50	88.99	86.43	114.87	130.25	118.88	108.41	118.80	111.33	110.70
150 to 154 pounds	49.30	51.28	52.47	95.20	90.61	108.12	99.78	105.52	106.19	94.53
155 to 159 pounds	19.95	26.40	47.84	60.46	65.87	71.01	82.53	78.27	82.33	67.83
160 to 164 pounds	7.04	26.40	21.61	33.51	45.31	47.34	52.86	56.60	65.17	47.67
165 to 169 pounds	4.11	5.28	13.89	19.15	28.32	27.97	37.76	41.23	50.52	32.99
170 to 174 pounds	4.70	6.03	4.63	10.81	14.61	20.98	23.73	18.87	34.91	21.29
175 to 179 pounds	3.52	3.02	3.09	7.98	7.75	11.30	15.10	18.87	29.87	16.60
180 pounds and over	1.76	1.51	4.63	5.67	10.43	13.99	22.65	21.66	77.29	34.52
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

TABLE NO. 54.—*Relation of weight to age.*

ABSOLUTE NUMBERS—COLORED RECRUITS, 1913.

Weights.	Age. 18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	Total.
119 pounds and under	5	7	3	9	3	.....	4	1	1	33
120 to 124 pounds	13	16	2	24	9	4	2	5	19	94
125 to 129 pounds	18	22	10	31	23	16	12	7	49	188
130 to 134 pounds	20	15	10	55	30	20	12	11	79	252
135 to 139 pounds	15	16	11	60	44	26	22	12	95	301
140 to 144 pounds	22	14	15	76	54	27	18	14	130	370
145 to 149 pounds	15	15	8	53	25	34	16	21	124	311
150 to 154 pounds	7	10	8	37	52	31	20	15	92	272
155 to 159 pounds	7	4	4	35	22	17	15	19	96	219
160 to 164 pounds	1	5	2	14	10	18	7	12	91	155
165 to 169 pounds	2	4	3	14	18	14	7	7	76	145
170 to 174 pounds	1	2	1	9	6	8	8	3	40	78
175 to 179 pounds	.....	1	.....	3	4	1	8	5	50	72
180 pounds and over	1	.....	.....	6	4	5	.....	1	97	114
Total	127	131	77	426	304	216	151	133	1,039	2,604

PROPORTIONAL NUMBERS—COLORED RECRUITS, 1913.

119 pounds and under	39.37	53.44	38.96	21.13	9.87	.....	26.49	7.52	0.96	12.67
120 to 124 pounds	102.36	122.14	25.97	56.34	29.61	18.52	13.25	37.59	18.29	36.10
125 to 129 pounds	141.73	167.94	129.87	72.77	75.66	74.07	79.47	52.63	47.16	72.20
130 to 134 pounds	157.48	114.50	129.87	129.11	98.68	92.59	79.47	82.71	76.04	96.77
135 to 139 pounds	118.11	122.14	142.86	140.85	144.74	120.37	145.70	90.23	91.44	115.59
140 to 144 pounds	173.23	106.87	194.81	178.40	177.63	125.00	119.21	105.26	125.12	142.09
145 to 149 pounds	118.11	114.50	103.90	124.41	82.24	157.41	105.96	157.89	119.34	119.43
150 to 154 pounds	55.12	76.34	103.90	86.85	171.05	143.52	132.45	112.78	88.55	104.45
155 to 159 pounds	55.12	30.53	51.95	82.16	72.37	78.70	99.34	142.86	92.39	84.10
160 to 164 pounds	7.87	38.17	25.97	32.86	32.89	60.19	46.36	90.23	87.58	59.53
165 to 169 pounds	15.75	30.53	38.96	32.86	59.21	64.81	46.36	52.63	73.14	55.68
170 to 174 pounds	7.87	15.27	12.99	21.13	19.74	37.04	52.98	22.56	38.50	29.95
175 to 179 pounds	.....	7.63	.....	7.04	13.16	4.63	52.98	37.59	48.13	27.65
180 pounds and over	7.87	.....	.....	14.08	13.16	23.15	.....	7.52	93.36	43.78
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

The average weight of recruits was 143.95 pounds; of the white troops 55.96 per cent weighed 140 pounds or over, and 2.06 per cent weighed less than the minimum, 120 pounds, as compared with 55.11 and 1.21 for 1912. Of the colored troops 66.67 per cent weighed 140 pounds or over, while 1.27 per cent weighed less than the minimum, 120 pounds, as compared with 63.37 and 0.39, respectively, for 1912.

TABLE NO. 55.—*Relation of chest measurement to age.*

ABSOLUTE NUMBERS—WHITE RECRUITS, 1913.

Chest measurement.	Age. 18 years and under.	19 years.	20 years.	21 years	22 years.	23 years.	24 years.	25 years.	26 years and over.	Total.
30 inches and under	444	288	139	551	280	133	109	81	309	2,334
31 inches	373	296	126	826	477	243	200	145	680	3,366
32 inches	417	299	146	1,357	748	360	336	253	1,399	5,315
33 inches	277	242	119	1,239	726	422	425	316	1,885	5,651
34 inches	128	118	64	862	558	338	351	282	1,943	4,644
35 inches	40	60	31	481	314	198	223	175	1,532	3,054
36 inches	19	16	18	224	171	106	125	96	1,114	1,889
37 inches	6	7	3	73	50	34	46	51	625	895
38 inches	.....	.....	1	18	22	23	27	23	370	484
39 inches and over	.....	.....	1	10	9	2	12	9	455	498
Total	1,704	1,326	648	5,641	3,355	1,859	1,854	1,431	10,312	28,130

TABLE No. 55.—*Relation of chest measurement to age*—Continued.

PROPORTIONAL NUMBERS—WHITE RECRUITS, 1913.

Chest measurement.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
30 inches and under.	260.56	217.19	214.51	97.68	83.46	71.54	58.79	56.60	29.97	82.98
31 inches	218.90	223.23	194.44	146.43	142.18	130.72	107.88	101.33	65.94	119.66
32 inches	244.72	225.49	225.31	240.56	222.95	193.65	181.23	176.80	135.67	188.94
33 inches	162.56	182.50	183.64	219.64	216.39	227.00	229.23	220.82	182.80	200.89
34 inches	75.12	88.99	98.77	152.81	166.32	181.82	189.32	197.06	188.42	165.09
35 inches	23.47	45.25	47.84	85.27	93.59	106.51	120.28	122.29	148.57	108.57
36 inches	11.15	12.07	27.78	39.71	50.97	57.02	67.42	67.09	108.03	67.15
37 inches	3.52	5.28	4.63	12.94	14.90	18.29	24.82	35.64	60.62	31.82
38 inches	.....	.....	1.54	3.19	6.56	12.37	14.56	16.07	35.88	17.21
39 inches and over...	.....	.....	1.54	1.77	2.68	1.08	6.47	6.29	44.13	17.70
Total.....	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

TABLE No. 56.—*Relation of chest measurement to age.*

ABSOLUTE NUMBERS—COLORED RECRUITS, 1913.

Chest measurements.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years	22 years.	23 years.	24 years.	25 years.	26 years and over.	
30 inches and under.	27	34	12	59	31	17	9	11	29	229
31 inches	26	31	20	66	44	25	18	13	73	316
32 inches	37	34	18	126	71	50	28	22	144	530
33 inches	18	13	13	76	55	48	36	41	188	488
34 inches	11	12	7	53	54	43	27	18	222	447
35 inches	6	4	4	20	30	19	20	15	153	271
36 inches	1	3	2	16	9	11	9	8	109	168
37 inches	.....	.....	1	7	7	2	3	2	60	82
38 inches	.....	.....	.....	3	2	1	1	3	35	45
39 inches and over...	1	.....	.....	.....	1	.....	.....	.....	26	28
Total.....	127	131	77	426	304	216	151	133	1,039	2,604

PROPORTIONAL NUMBERS—COLORED RECRUITS, 1913.

30 inches and under.	212.60	259.54	155.84	138.50	101.97	78.70	59.60	82.71	27.91	87.94
31 inches	204.72	236.64	259.74	154.93	144.74	115.74	119.21	97.74	70.26	121.35
32 inches	291.34	259.54	233.77	295.77	233.55	231.48	185.43	165.41	138.59	203.53
33 inches	141.73	99.24	168.83	178.40	180.92	222.22	238.41	308.27	180.94	187.40
34 inches	86.62	91.60	90.91	124.41	177.63	199.07	178.81	135.34	213.67	171.66
35 inches	47.24	30.53	51.95	46.95	98.68	87.96	132.45	112.78	147.25	104.07
36 inches	7.87	22.90	25.97	37.56	29.61	50.93	59.60	60.15	104.91	64.52
37 inches	.....	.....	12.99	16.43	23.03	9.26	19.87	15.04	57.75	31.49
38 inches	.....	.....	.....	7.04	6.58	4.63	6.62	22.56	33.69	17.28
39 inches and over...	7.87	.....	.....	.....	3.29	.....	.....	.....	25.02	10.75
Total.....	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

The chest measurement of 40.75 per cent of the white recruits was 34 inches and over, and 8.30 per cent were 30 inches and under, as compared with 54.67 and 1.13, respectively, for the preceding year. The chest measurements for colored recruits show 39.98 per cent 34 inches or over and 8.79 per cent 30 inches and under, as compared with 51.38 and 1.71, respectively, for 1912.

TABLE NO. 57.—*Causes of rejection by medical officers of the Army, of candidates examined for enlistment, 1913.*

Causes of rejection.	Total.		White.						Colored.	
			Native born.		Foreign born.		Total.			
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Heart disease	615	124.19	478	125.86	105	131.91	583	126.90	32	89.39
Diseases of the ear, including defects of hearing	435	87.84	335	88.20	85	106.78	420	91.42	15	41.90
Venereal diseases	407	82.19	301	79.25	40	50.25	341	74.22	66	184.36
Diseases of the eye, including defects of vision	366	73.91	279	73.46	65	81.66	344	74.88	22	61.45
Flat foot	343	69.26	266	70.04	55	69.10	321	69.87	22	61.45
Hernia	188	37.96	151	39.76	14	17.59	165	35.91	23	64.25
Diseases of the genito-urinary system, nonvenereal	155	31.30	130	34.23	10	12.56	140	30.47	15	41.90
Diseases of the respiratory system	142	28.68	112	29.49	19	23.87	131	28.52	11	30.73
Diseases of the organs of locomotion, except spinal curvature	132	26.66	113	29.75	16	20.10	129	28.08	3	8.38
Alcoholism	131	26.45	115	30.28	13	16.33	128	27.85	3	8.38
Tuberculosis	120	24.23	98	25.80	15	18.84	113	24.60	7	19.55
Defective teeth	107	21.61	89	23.43	9	11.31	98	21.33	9	25.14
Diseases of the skin	106	21.41	82	21.59	17	21.36	99	21.55	7	19.55
Varicose veins	76	15.35	54	14.22	18	22.61	72	15.67	4	11.17
Defects of development, except as shown in detail	73	14.74	64	16.85	7	8.79	71	15.45	2	5.59
Underweight	69	13.93	64	16.85	4	5.03	68	14.80	1	2.79
Curvature of the spine	68	13.73	50	13.16	10	12.56	60	13.06	8	22.35
General diseases	68	13.73	55	14.48	7	8.79	62	13.50	6	16.76
Chest development, insufficient	56	11.31	49	12.90	4	5.03	53	11.54	3	8.38
Diseases of the nervous system, except as shown in detail	54	10.90	43	11.32	6	7.54	49	10.67	5	13.97
Weakness of mind	46	9.29	41	10.80	3	3.77	44	9.58	2	5.59
Hemorrhoids	36	7.27	29	7.64	5	6.28	34	7.40	2	5.59
Physical debility	32	6.46	26	6.85	6	7.54	32	6.97	.....	.....
Diseases of the digestive system, except as shown in detail	23	4.64	18	4.74	2	2.51	20	4.35	3	8.38
Varicocele	16	3.23	15	3.95	.....	.....	15	3.27	1	2.79
Overweight and obesity	8	1.62	6	1.58	1	1.26	7	1.52	1	2.79
Underheight	8	1.62	3	.79	5	6.28	8	1.74	.....	.....
Diseases of the circulatory system, except as shown in detail	6	1.21	5	1.32	1	1.26	6	1.31	.....	.....
Overheight	1	.20	1	.26	.....	.....	1	.22	.....	.....
Injuries	155	31.30	131	34.49	14	17.59	145	31.56	10	27.93
Rejected for causes physical and mental	4,042	816.24	3,203	843.34	556	698.49	3,759	818.24	283	790.50
Rejected for causes not physical	910	183.76	595	156.66	240	301.51	835	181.76	75	209.50
Total rejected	4,952	1,000.00	3,798	1,000.00	796	1,000.00	4,594	1,000.00	358	1,000.00

It is notable that venereal diseases, which in 1912 and 1911 caused the greatest number of rejections, are only third as a cause of rejection for 1913. This is probably due to the more careful inspections made at recruiting offices. This cause of rejection for whites is lower than for 1912, when it was 92.39, and higher for colored applicants, the rate being 167.86 in 1912. This year, as last, the diseases causing the greatest number of rejections were: Heart disease, diseases of the ear (including defects of hearing), venereal diseases, diseases of the eye (including defects of vision), and flat foot. The number rejected for the last five causes was about 437 per 1,000 of the total. Heart disease, which caused the largest proportion of rejections, was higher than in 1912, being 124.19 as compared with

94.70 in 1912. In the white race heart disease caused the greatest number of rejections, the rate being 126.90 per 1,000. In the colored race the highest rate was for venereal diseases, 184.36 per 1,000. This was higher than in 1912, when it was 167.86. Table No. 58 shows the principal occupations of 20,144 recruits enlisted during the year:

TABLE NO. 58.—*Principal occupations of recruits, first enlistment, 1913.*

Occupation.	Number in each case.			Occupation.	Number in each case.		
	Total.	White.	Colored.		Total.	White.	Colored.
Laborers	6,912	5,786	1,126	Core makers	35	35	.....
Farmers	2,444	2,364	80	Leather workers	31	31	.....
Drivers and stablemen	1,066	1,006	60	Plasterers	30	25	5
Clerks	939	935	4	Stenographers	29	29	.....
Machinists	770	761	9	Conductors	29	29	.....
Firemen	498	473	25	Motormen	29	29	.....
Carpenters	460	443	17	Hatters	28	28	.....
Painters	441	428	13	Paper workers	28	27	1
Miners	439	399	40	Glass workers	26	25	1
Cooks	414	325	89	Civil engineers and surveyors	25	25	.....
Electricians	333	333	.....	Photographers	24	24	.....
Printers and bookbinders	257	252	5	Merchants	24	24	.....
Plumbers	254	253	1	Cement workers	21	19	2
Waiters	244	170	74	Automobile workers	19	18	.....
Chauffeurs	229	183	46	Packers	19	19	.....
Tailors	225	202	23	Dairymen	18	18	.....
Barbers	213	199	14	Bartenders	17	16	1
Musicians	209	198	11	Draftsmen	17	17	.....
Blacksmiths and horseshoers	188	180	8	Moving picture operators	16	16	.....
Railroad hands	185	176	9	Box makers	15	15	.....
Porters	164	63	101	Coopers	15	15	.....
Salesmen	164	164	.....	Agents	14	14	.....
Metal workers	161	161	.....	Inspectors	14	14	.....
Bakers	159	153	6	Laundrymen	14	13	1
Engineers	153	149	4	Actors	12	12	.....
Shoemakers	148	143	5	Upholsterers	12	11	1
Butchers	143	136	7	Brass workers	11	11	.....
Sailors	127	126	1	Cigar makers	11	10	1
Molders	126	116	10	Foremen	11	11	.....
Telegraphers	112	112	.....	Confectioners	10	10	.....
Linemen	111	111	.....	Rubber workers	10	10	.....
Bookkeepers	100	100	.....	Bridge workers	9	9	.....
Weavers	92	92	.....	Designers and decorators	9	9	.....
Masons (brick and stone)	91	85	6	Florists	9	9	.....
Boiler makers	88	86	2	Gardeners	8	8	.....
Tinners	78	77	1	Undertakers	8	7	1
Mill workers	70	70	.....	Cranemen	7	7	.....
Furniture workers	67	67	.....	Knitters	7	7	.....
Students	64	63	1	Locksmiths	7	7	.....
Mechanics	60	60	.....	Oilers	7	6	1
Nurses	56	56	.....	Dyers	6	6	.....
Jewelers	45	45	.....	Miscellaneous	235	227	8
Druggists	41	40	1				
Teachers	41	39	2	Total	20,144	18,319	1,825
Lumbermen	37	37	.....				

PHILIPPINE SCOUTS.

The following requirements are taken from General Orders No. 1, Headquarters Philippines Division, Manila, P. I., January 1, 1910:

The physical examination of recruits for the Philippine Scouts will be conducted in accordance with the authorized manual for the examination of recruits, except as hereinafter specified. It will include examination for filarial disease, and any applicant afflicted therewith will be rejected.

No recruit for the Scouts will be accepted for enlistment who is under 59 inches in height or 100 pounds in weight.

The following table will be used in determining the minimum allowable weight and chest measurements relative to height:

Table of physical proportions for height, weight, and chest measurements.

Height.	Weight.	Chest measurement (at expiration).
Inches.	*Pounds.*	*Inches.*
59	100	28½
60	101	28¾
61	102	29
62	103	29¼
63	105	29½
64	107	29¾
65	110	30
66	113	30¼
67	118	30½
68	124	30¾
69	127	31
70	130	31¼

Chest measurement at expiration should be taken under conditions of normal respiratory effort. Chest mobility and measurement at inspiration will be taken, but will not be used as data for rejection of a candidate for enlistment, unless they are such as to indicate abnormality or pathological conditions.

In the case of an especially desirable applicant who is active, has firm muscles, and is evidently vigorous and healthy, who varies from the established standard, special authority for the enlistment may be requested from these headquarters.

The anthropometrical characteristics of the Philippine races can be noted in part in the following tables. The proportion of recruits accepted to those examined was lower in 1913 than in 1912, being 48.67, per cent, as compared with 95.05. The total number examined in 1913 was 3,148, as compared with 870 for 1912.

TABLE No. 59.—*Examination of Philippine applicants for enlistment, 1913.*

	Number.	Ratio per 1,000 examined.
Examined by medical officers	3,148	1,000.00
Accepted by medical officers	1,532	486.66
By first enlistment	606	192.50
Other enlistments	926	294.16
Rejected by medical officers	77	24.46
Declined	7	2.22

TABLE No. 60.—*Philippine recruits (accepted).*

	Number.	Ratio.		Number.	Ratio.
18 years and under	40	26.11	31 years	72	47.00
19 years	68	44.39	32 years	50	32.64
20 years	32	20.89	33 years	74	48.30
21 years	180	117.49	34 years	35	22.85
22 years	98	63.97	35 years	31	20.24
23 years	54	35.25	36 years	26	16.97
24 years	178	116.19	37 years	14	9.14
25 years	132	86.16	38 years	16	10.44
26 years	63	41.12	39 years	9	5.88
27 years	98	63.97	40 years and over	28	18.28
28 years	80	52.22			
29 years	78	50.91	Total	1,532	1,000.00
30 years	76	49.61			

TABLE No. 61.—*Philippine recruits—Relation of height to age.*

ABSOLUTE NUMBERS, 1913.

Height.	Age.									
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	Total.
4 feet 11 inches	2	1	.....	2	2	.....	1	2	8	18
5 feet	2	3	.....	10	4	4	8	4	27	62
5 feet 1 inch	9	9	8	25	16	7	13	9	75	171
5 feet 2 inches	6	15	9	40	15	11	21	20	113	250
5 feet 3 inches	7	14	4	37	23	15	42	28	142	312
5 feet 4 inches	8	9	4	32	12	6	46	27	138	276
5 feet 5 inches	2	10	1	18	7	3	28	15	117	201
5 feet 6 inches	2	1	5	9	15	3	19	17	80	151
5 feet 7 inches	2	3	.....	6	1	1	1	6	25	45
5 feet 8 inches	.....	2	1	1	3	2	2	3	14	28
5 feet 9 inches	.....	1	.....	.....	.....	.....	1	.....	4	6
5 feet 10 inches	.....	.....	.....	.....	.....	2	2	1	5	10
5 feet 11 inches and over	.....	.....	.....	.....	.....	.....	.....	.....	2	2
Total	40	68	32	180	98	54	178	132	750	1,532

PROPORTIONAL NUMBERS, 1913.

4 feet 11 inches	50.00	14.71	.....	11.11	20.41	.....	5.62	15.15	10.67	11.75
5 feet	50.00	44.12	.....	55.56	40.82	74.07	44.94	30.30	36.00	40.47
5 feet 1 inch	225.00	132.35	250.00	138.89	163.28	129.63	73.03	68.18	100.00	111.62
5 feet 2 inches	150.00	220.59	281.25	222.22	153.06	203.70	117.98	151.51	150.66	163.19
5 feet 3 inches	175.00	205.88	125.00	205.55	234.69	277.78	235.95	212.12	189.33	203.66
5 feet 4 inches	200.00	132.35	125.00	177.78	122.45	111.11	224.72	204.54	184.00	180.16
5 feet 5 inches	50.00	147.06	31.25	100.00	71.43	55.56	157.30	113.64	156.00	131.20
5 feet 6 inches	50.00	14.71	156.25	50.00	153.06	55.56	106.74	128.79	106.67	98.56
5 feet 7 inches	50.00	44.12	.....	33.33	10.20	18.52	5.62	45.45	33.33	29.37
5 feet 8 inches	.....	29.41	31.25	5.56	30.61	37.04	11.24	22.73	18.67	18.28
5 feet 9 inches	.....	14.71	.....	.....	.....	.....	5.62	.....	5.33	3.92
5 feet 10 inches	.....	.....	.....	.....	.....	37.04	11.24	7.58	6.67	6.53
5 feet 11 inches and over	.....	.....	.....	.....	.....	.....	.....	.....	2.67	1.31
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

Fifty-three and seven one-hundredths per cent of all recruits were 5 feet 3 inches or less, which is below the minimum standard for American soldiers; 5.32 per cent were above the average height of American recruits.

TABLE No. 62.—*Philippine recruits—Relation of weight to age.*

ABSOLUTE NUMBERS, 1913.

Weight.	Age.									
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	Total.
99 pounds and under	1	.....	1	2	.....	1	1	1	7	14
100 to 104 pounds	7	9	3	21	7	3	6	9	62	127
105 to 109 pounds	6	9	5	26	12	11	22	17	71	179
110 to 114 pounds	9	18	9	48	24	9	28	16	114	275
115 to 119 pounds	8	13	4	29	22	5	36	31	134	282
120 to 124 pounds	1	14	4	26	19	11	32	21	104	235
125 to 129 pounds	4	3	4	11	5	7	24	14	90	162
130 to 134 pounds	4	.....	2	8	3	1	11	12	65	106
135 to 139 pounds	.....	.....	.....	6	4	3	8	2	55	78
140 to 144 pounds	.....	1	.....	.....	1	3	2	2	14	23
145 to 149 pounds	.....	1	.....	3	1	.....	7	2	14	28
150 to 154 pounds	.....	.....	.....	.....	.....	.....	1	1	7	9
155 to 159 pounds	.....	.....	.....	.....	.....	.....	.....	1	6	7
160 pounds and over	.....	.....	.....	.....	.....	.....	.....	.....	7	7
Total	40	68	32	180	98	54	178	132	750	1,532

TABLE NO. 62.—*Philippine recruits—Relation of weight to age*—Continued.

PROPORTIONAL NUMBERS, 1913.

Weight.	Age.									
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	Total.
99 pounds and under	25.00	.....	31.25	11.11	.....	18.52	5.62	7.58	9.33	9.14
100 to 104 pounds	175.00	132.35	93.75	116.67	71.43	55.56	33.71	68.18	82.67	82.89
105 to 109 pounds	150.00	132.35	156.25	144.44	122.45	203.70	123.59	128.79	94.67	116.84
110 to 114 pounds	225.00	264.71	281.25	266.67	244.90	166.67	157.30	121.21	152.00	179.50
115 to 119 pounds	200.00	191.18	125.00	161.11	224.49	92.59	202.25	234.85	178.67	184.07
120 to 124 pounds	25.00	205.88	125.00	144.44	163.88	203.73	179.77	181.82	138.67	153.33
125 to 129 pounds	100.00	44.12	125.00	61.11	51.02	129.63	134.83	106.06	120.00	105.74
130 to 134 pounds	100.00	.....	62.50	44.44	30.61	18.52	61.80	90.90	86.67	69.19
135 to 139 pounds	.....	.....	.....	33.33	40.82	55.56	44.94	15.15	73.33	50.91
140 to 144 pounds	.....	14.71	.....	.....	10.20	55.56	11.24	15.15	18.67	15.01
145 to 149 pounds	.....	14.71	.....	16.67	10.20	.....	39.33	15.15	18.67	18.28
150 to 154 pounds	.....	.....	.....	.....	.....	.....	5.62	7.58	9.33	5.87
155 to 159 pounds	.....	.....	.....	.....	.....	.....	.....	7.58	8.00	4.57
160 pounds and over	.....	.....	.....	.....	.....	.....	.....	.....	9.33	4.57
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,800.00	1,000.00	1,000.00	1,000.00	1,000.00

It will be observed that the weight of 57.24 per cent of all recruits is less than 120 pounds, the minimum standard for American recruits. Only 3.33 per cent were the average weight of American recruits or above the average weight.

TABLE NO. 63.—*Philippine recruits—Relation of chest measurement to age.*

ABSOLUTE NUMBERS, 1913.

Chest measurement.	Age.									
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	Total.
26 inches and under	1	.....	.....	.....	.....	.....	.....	.....	.....	1
27 inches	.....	.....	.....	.....	.....	.....	.....	.....	1	1
28 inches	1	.....	2	5	2	.....	1	.....	8	19
29 inches	2	9	4	27	7	8	9	10	51	117
30 inches	9	15	3	44	25	7	30	21	114	268
31 inches	9	18	12	44	28	14	51	32	182	390
32 inches	9	10	4	37	22	15	52	37	182	374
33 inches	6	7	5	17	9	6	24	18	116	208
34 inches	.....	2	2	6	1	2	8	12	58	91
35 inches	2	.....	.....	.....	4	2	3	2	31	44
36 inches and over	1	1	.....	.....	.....	.....	.....	.....	17	19
Total	40	68	32	180	98	54	178	132	750	1,532

PROPORTIONAL NUMBERS, 1913.

26 inches and under	25.00	.....	.....	.....	.....	.....	.....	.....	.....	0.65
27 inches	.....	.....	.....	.....	.....	.....	.....	.....	1.33	.65
28 inches	25.00	.....	62.50	27.78	20.41	.....	5.62	.....	10.67	12.40
29 inches	50.00	132.35	125.00	150.00	71.43	148.15	50.56	75.76	54.67	76.37
30 inches	225.00	220.59	93.75	244.44	255.10	129.63	168.54	159.09	152.00	174.93
31 inches	225.00	264.71	375.00	244.44	285.72	259.26	286.52	242.42	242.67	254.57
32 inches	225.00	235.29	125.00	205.56	224.49	277.78	292.13	280.30	242.67	244.13
33 inches	150.00	102.94	156.25	94.44	91.84	111.11	134.83	136.36	154.66	135.77
34 inches	.....	29.41	62.50	33.33	10.20	37.04	44.94	90.91	77.33	59.40
35 inches	50.00	.....	.....	.....	40.82	37.04	16.85	15.15	41.33	28.72
36 inches and over	25.00	14.71	.....	.....	.....	.....	.....	.....	22.67	12.40
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

FINANCIAL STATEMENT, 1914.[1]

Medical and hospital department, 1914.

Appropriated by act approved Mar. 2, 1913		$750,000.00
Appropriated by act approved May 25, 1914		50,000.00
		800,000.00
Refundments during the year		61.25
Total to be accounted for		800,061.25
Disbursed during the year:		
Expenses of medical supply depots	$920.13	
Medical and hospital supplies	453,181.33	
Medical attendance and medicines (except at recruiting stations)	8,670.80	
Medical expenses of recruiting (including medical attendance and medicines at recruiting stations)	5,124.55	
Pay of employees	145,605.53	
Hospital laundry	40,098.77	
Expressage	118.87	
Gas and electricity for laboratory apparatus, etc	1,644.23	
Customs duties and internal-revenue taxes on medical supplies	162.99	
Miscellaneous	83.41	
		655,610.61
Balances on hand June 30, 1914:		
In United States Treasury	52,542.85	
In transit from disbursing officers to the Treasury	8,745.43	
In hands of disbursing officers—		
New York City	28,439.46	
Washington, D. C	23,907.81	
St. Louis, Mo	12,620.60	
Honolulu, Hawaii	652.20	
Hot Springs, Ark	540.08	
San Francisco, Cal	3,811.32	
Manila, P. I	13,190.89	
		144,450.64
Total accounted for		800,061.25

Medical and hospital department, 1913.

Balances on hand July 1, 1913, act Aug. 24, 1912		87,045.83
Refundments during the year		3.45
Total to be accounted for		87,049.28
Disbursed during the year:		
Expenses of medical supply depots	$208.71	
Medical and hospital supplies	70,511.97	
Medical attendance and medicines (except at recruiting stations)	2,687.29	
Medical expenses of recruiting	1,011.82	
Pay of employees	1,793.77	
Hospital laundry	7,300.64	
Expressage	51.98	
Gas and electricity for laboratory apparatus, etc	215.05	

[1] The "disbursements" in this statement include settlements with public creditors made by the accounting officers of the Treasury and charged to these appropriations.

Disbursed during the year—Continued.		
Customs duties and internal-revenue taxes	$21.39	
Miscellaneous	5.60	
		$83,808.22
Treasury settlement, refund to carrier for erroneous deduction		60.78
Balance on hand June 30, 1914, in United States Treasury		3,180.28
Total accounted for		87,049.28

Medical and hospital department, 1912.

Balance on hand July 1, 1913, act Mar. 3, 1911		40,389.91
Disbursed during the year:		
Medical and hospital supplies	$223.06	
Medical attendance and medicines (except at recruiting stations)	84.90	
Hospital laundry	472.96	
Expressage	6.24	
		787.16
Carried to surplus fund		39,602.75

Replacing medical supplies, 1914–1915 (act June 12, 1906, 34 Stats., 256).

Amounts accruing to this fund:		
A. On account of supplies transferred—		
To Quartermaster Corps, U. S. Army	$626.20	
To Engineer Department, U. S. Army	17.75	
To Panama Canal	6,779.77	
To Navy and Marine Corps	4,087.88	
To Bureau of Plant Industry	8.46	
To Forest Service	600.00	
To Indian Service	22.25	
To Reclamation Service	38.40	
To State Department (relief of refugees, west coast of Mexico)	132.26	
To Public Health Service	5.75	
To States, for the use of the militia	25,575.66	
		37,894.38
B. On account of supplies sold—		
To States, for the use of the militia	1,087.77	
To Civil Government Philippine Islands	611.39	
To United States Soldiers' Home	19,372.45	
To civilian employees and civilians	6,552.00	
		27,623.61
C. On account of collections from carriers and others for medical property lost or destroyed		550.80
Total to be accounted for		66,068.79
Treasury transfer to "Replacing medical supplies, 1913–14," to correct erroneous deposit		11.72
Treasury settlement, refund to employee for erroneous collection		14.25
Balance on hand June 30, 1914, in United States Treasury		66,042.82
Total accounted for		66,068.79

Replacing medical supplies, 1913–14.

Balance on hand, July 1, 1913		60,940.28
Amounts accruing to this fund:		
A. On account of supplies transferred—		
To Quartermaster Corps, U. S. Army	$432.34	
To Engineer Department, U. S. Army	6.75	
To Panama Canal	1,562.58	
To Navy	4,178.38	

Amounts accruing to this fund—Continued.		
A. On account of supplies transferred—Continued.		
To Bureau of Education	$5.42	
To Land Office	3.30	
To Reclamation Service	97.95	
To States, for the use of the militia	13,776.91	
		$20,063.63
B. On account of supplies sold—		
To Government of Porto Rico	379.91	
To United States Soldiers' Home	2,136.75	
To civilian employees and civilians	1,278.67	
		3,795.33
C. On account of collections from carriers and others for medical property lost or destroyed		330.71
D. On account of Treasury transfer from "Replacing medical supplies 1914–15" to correct erroneous deposit		11.72
Total to be accounted for		85,141.67
Disbursed during the year for medical and hospital supplies		85,092.07
Balance on hand June 30, 1914, in United States Treasury		49.60

Replacing medical supplies, 1912–13.

Balances on hand July 1, 1913	7,505.69
Amounts accruing to this fund on account of medical supplies sold to civilian employees and civilians	6.00
Total to be accounted for	7,511.69
Disbursed during the year for medical and hospital supplies	7,504.09
Balance on hand June 30, 1914, in United States Treasury	7.60

Replacing medical supplies, 1911–12.

Balance on hand July 1, 1913	9,261.94
Carried to surplus fund	9,261.94

Library, Surgeon General's office, 1914.

Appropriated by act approved Mar. 2, 1913		10,000.00
Disbursed during the year		5,312.01
Balances on hand June 30, 1914:		
In United States Treasury	$1,951.90	
In hands of disbursing officer, Washington, D. C.	2,736.09	
		4,687.99

Library, Surgeon General's office, 1913.

Balances on hand July 1, 1913, act Aug. 24, 1912	3,816.67
Disbursed during the year	3,767.82
Balance on hand June 30, 1914, in transit from disbursing officer, Washington, D. C., to United States Treasury	48.85

Library, Surgeon General's office, 1912.

Balance on hand July 1, 1913, act Mar. 3, 1911	19.62
Carried to surplus fund	19.62

Army Medical Museum, 1914.

Appropriated by act approved Mar. 2, 1913		5,000.00
Disbursed during the year		2,922.23
Balances on hand June 30, 1914:		
In United States Treasury	$998.60	
In hands of disbursing officer, Washington, D. C.	1,079.17	
		2,077.77

Army Medical Museum, 1913.

Balances on hand July 1, 1913, act Aug. 24, 1912		$1,588.56
Disbursed during the year		1,255.75
Balances on hand June 30, 1914:		
In United States Treasury	$100.00	
In transit from disbursing officer, Washington, D. C., to United States Treasury	232.81	
		332.81

Army Medical Museum, 1912.

Balance on hand July 1, 1913, act Mar. 3, 1911	94.11
Carried to surplus fund	94.11

Artificial limbs, 1914.

Appropriated by act approved June 23, 1913		85,000.00
Disbursed during the year		71,177.00
Balances on hand June 30, 1914:		
In United States Treasury	$7,950.00	
In hands of disbursing officer, Washington, D. C	5,873.00	
		13,823.00

Artificial limbs, 1913.

Balances on hand July 1, 1913, act Aug. 24, 1912	15,420.76
Disbursed during the year	2,162.45
Balance on hand June 30, 1914, in United States Treasury	13,258.31

Artificial limbs, 1912.

Balance on hand July 1, 1913, act Mar. 3, 1911	36,657.54
Disbursed during the year	51.22
Carried to surplus fund	36,606.32

Appliances for disabled soldiers, 1914.

Appropriated by act approved June 23, 1913		2,000.00
Disbursed during the year		817.24
Balances on hand June 30, 1914:		
In United States Treasury	$1,000.00	
In hands of disbursing officer, Washington, D. C	182.76	
		1,182.76

Appliances for disabled soldiers, 1913.

Balances on hand July 1, 1913, act Aug. 24, 1912	1,162.78
Disbursed during the year	44.00
Balance on hand June 30, 1914, in United Staces Treasury	1,118.78

Appliances for disabled soldiers, 1912.

Balance on hand July 1, 1913, act Mar. 3, 1911	1,032.18
Carried to surplus fund	1,032.18

Trusses for disabled soldiers, 1914.

Appropriated by act approved June 23, 1913	4,000.00
Refundment during the year	8.07
Total to be accounted for	4,008.07
Disbursed during the year	1,917.16

Balances on hand June 30, 1914:		
In United States Treasury	$1,858.07	
In hands of disbursing officer, Washington, D. C.	232.84	
		$2,090.91
Total accounted for		4,008.07

Trusses for disabled soldiers, 1913.

Balances on hand July 1, 1913, act Aug. 24, 1912	2,614.05
Disbursed during the year	176.85
Balance on hand June 30, 1914, in United States Treasury	2,437.20

Trusses for disabled soldiers, 1912.

Balance on hand July 1, 1913, act Mar. 3, 1911	2,090.53
Carried to surplus fund	2,090.53

General summary of all appropriations.

Balances on hand July 1, 1913	269,640.45
Appropriated	906,000.00
Proceeds of sales, etc., accruing to replacing funds, act of June 12, 1906 (34 Stats., 256)	90,264.46
Refundments during the year	72.77
Total to be accounted for	1,265,977.68
Disbursed during the year	922,405.88
Refund to carrier for erroneous deduction	60.78
Refund to employee for erroneous collection	14.25
Carried to surplus fund	88,707.45
Balances on hand June 30, 1914	254,789.32
Total accounted for	1,265,977.68

Serviceable medical equipments and supplies belonging to the Medical Department were transferred to other branches and instrumentalities of the Government, issued to States for the use of the Organized Militia, and sold to States and others conformably to law and regulations during the fiscal year 1914, in the total amount of $85,944.14, as shown by the records of this office on June 30, 1914; of which amount $65,517.99 had on or before that date been placed to the credit of the replacing fund established by the act approved June 12, 1906 (34 Stats., 256), and the balance of $20,426.15 was awaiting settlement. The following tabular statement exhibits these transactions in detail:

A. Supplies issued to States for the use of the Organized Militia under section 1661, Revised Statutes, and appropriations supplementary thereto:

Alabama	$1,042.75
Arizona	256.78
Arkansas	245.47
California	45.35
Colorado	3.22
Connecticut	1,619.13
Delaware	27.54
District of Columbia	171.00
Florida	729.39
Georgia	289.20
Idaho	489.96
Illinois	679.21
Indiana	1,295.28
Iowa	237.51

A. Supplies issued to States for the use of the Organized Militia under section 1661, Revised Statutes, and appropriations supplementary thereto—Continued.		
Kansas	$1,202.92	
Kentucky	888.76	
Louisiana	832.23	
Maine	209.47	
Maryland	214.01	
Massachusetts	1,439.96	
Michigan	831.06	
Minnesota	70.65	
Mississippi	14.51	
Missouri	398.06	
Nebraska	202.25	
New Hampshire	363.23	
New Jersey	1,086.69	
New Mexico	26.50	
New York	9,092.67	
North Carolina	2,851.37	
North Dakota	42.28	
Ohio	2,016.66	
Oklahoma	110.07	
Oregon	1,125.54	
Pennsylvania	36.25	
Rhode Island	6.31	
South Carolina	27.36	
South Dakota	655.12	
Tennessee	25.00	
Texas	600.00	
Utah	72.00	
Vermont	50.00	
Virginia	64.38	
Washington	894.87	
West Virginia	1,397.44	
Wisconsin	4,386.44	
Wyoming	496.62	
		$38,862.47
B. Supplies sold to States under section 17 act of January 21, 1903 (32 Stats., 778):		
California	13.00	
Connecticut	1.25	
Florida	1.50	
Georgia	4.26	
Massachusetts	10.85	
Minnesota	288.00	
New York	81.42	
North Carolina	37.15	
Ohio	91.00	
Pennsylvania	258.83	
Tennessee	250.04	
Vermont	6.75	
Wisconsin	134.22	
		1,178.27
C. Supplies transferred to other bureaus and departments of the Government:		
Quartermaster Corps, U. S. Army	626.20	
Engineer Department, U. S. Army	17.75	
Panama Canal	6,906.53	
State Department (relief of refugees, west coast Mexico)	132.26	
Navy and Marine Corps	10,285.41	
Indian Service	22.25	
Reclamation Service	148.60	
Public Health Service	5.75	
Forest Service	1,200.00	
Bureau of Plant Industry	8.46	
Interstate Commerce Commission	14.35	
		19,367.56

D. Sales to the civil government of the Philippine Islands	$611.3
E. Sales to the United States Soldiers' Home	19,372.4
F. Sales to civilian employees of the Army and civilians	6,552.0
	85,944.1

In addition, sales estimated at about $2,300 to the Soldiers' Home and sales to civilian employees probably amounting to $1,000 or $1,500 were made during the year which had not become matters of account in this office on or before June 30.

VITAL STATISTICS.

The following tables show in detail most of the statistical data upon which the statements in this report are based:

66. Surgical operations performed on American troops.
67. Numerical view of the effect of disease and injury on United States troops serving at home and abroad in the year 1913 as compared with the corresponding data for the year 1912, by races.
68. Admissions to sick report, discharges, and deaths in the Army with ratios per 1,000 of mean strength, in which all available data for the period 1903–1912 is placed in comparison with the year 1913.
68½. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength for the Army, separately for officers, total enlisted (including American, Porto Rican, and Philippine troops), and grand total, year 1913.
69. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, year 1913, for American troops, officers, and total enlisted, of the Army.
70. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for American troops, of the Army, white, colored, and total, for the year 1913.
71. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the year 1913, United States, continental (excluding Alaska), and separately for white and colored troops serving therein (enlisted men).
72. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the year 1913, enlisted American troops serving in the Philippine Islands.
73. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for enlisted American troops serving in Alaska, Canal Zone, and China for the year 1913.
74. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength for enlisted American troops serving in Hawaii, 1913.
75. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength for enlisted American troops on Army transports, for Porto Rican native troops, and for Philippine Scouts, year 1913.
76. Admissions to sick report, discharges, deaths, and noneffectiveness expressed in ratios per 1,000 of mean strength, for American troops (enlisted men) on duty at home stations, placed in comparison with the same data for those serving at distant stations, year 1913.
77. Total movement of sick for the United States Army, enlisted men, at home, compared with that of foreign armies, 1913.
78. A comparison of the admission and death rates, United States Army, enlisted men, at home, for certain special diseases, with those of foreign armies, 1913.
79. Showing the most important diseases, by divisions, in the United States, enlisted men, 1913.
80. Comparative figures, Army, 1909–1913, enlisted men.
81. Admissions and cases compared, 1904–1911, inclusive.

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1918.*

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Gas.	Local.	None.
	EYE.											
	Rupture of eyeball	3	3					3				
	Irido-choroiditis	1	1					1				
	Panophthalmitis	2	2					2				
Enucleation	Keratitis and staphyloma	1	1					1				
	Punctured wound of eye	1	1					1				
	Symblepharon posterior, upper and lower lids, am lyonia and keratitis.	1	1					1				
Dissection with deepening of conjunctival socket.	Symblepharon following destruction of eye by burn.	1	1								1	
Incision and suture	2	Symblepharon	3	3							3	
Division of adhesions	1											
Advancement of internal rectus	1	Strabismus external	2	2							2	
Partial tenotomy of external rectus	1											
Advancement of external rectus	2	Strabismus internal	3	3							3	
Tenotomy of internal rectus	1											
Excision and suture	19											
Transplantation	10											
McReynold's operation	9	Pterygium	40	40							40	
Tucking operation	1											
Strangulation	1											
Incision		Dacryocystitis	1	1							1	
Expression		Trachoma	11	11				11				
Curetment	1	Corneal ulcer	4	4							4	
Curetment and cauterization	3											
Corneal section and iridectomy.		Foreign body in lens and iris.	1			1					1	
Enucleation of eye		Foreign body (piece of steel) in eye.	1	1				1				
Extraction		Foreign body in anterior chamber.	1	1							1	
		Foreign body imbedded in cornea.	12	12							12	
Incision and drainage	2	Chalazion	14	14							12	2
Excision and curetment	12											
Aspiration	1	Pinguecula	2	2							2	
Excision	1											
Incision		Abscess, subconjunctival	4	4							4	
Incision and curetment		Abscess of lid	15	15							15	
Excision		Meibomian cyst	3	3							3	
Excision and curetment		Lymphoid growth of lid	1	1							1	
	EAR.											
Mastoidotomy	5											
Mastoidotomy curetment and drainage	3	Mastoiditis	9	8			1	2	5	1	1	
Opening of mastoid and drainage of intra-cranial fossa	1											
Stacke-Schwartz operation	1											
Incision of tympanum	16	Otitis media	29	29				1		12	13	3
Paracentesis	12											
Incision and drainage		Otitis externa	2	2				1			1	
		Abscess of meatus	1	1							1	
	NOSE.											
Resection both middle turbinates	1											
Removal anterior wall of sinus	1	Sinusitis, frontal	2	2				1			1	

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1913*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Gas.	Local.	None.
	NOSE—continued.											
Curetment of ethmoid cells 2 Submucous resection, septum nasi 2 Turbinectomy by sawing 2 Resection, middle turbinates 7	Sinusitis	13	13								13	
Puncture nasal wall and drainage 1 Opening of antrum through tooth socket 2	Sinusitis, maxillary	3	3				1	1			1	
Opening of antrum through canine fossa.	Empyema of antrum	1	1					1				
Cauterization 17 Turbinectomy 14 Watson's flap operation 1 Submucous resection 37	Hypertrophy of turbinates.	31	31								31	
Section and forcible straightening 1 Operation not stated 6 Asch's operation 3 Ballenger's resection 1 Submucous resection 53	Deflection of septum	45	45					1			39	5
	Deviation of septum	57	57				1	2			54	
Refracture and resetting	Deformity of nose Nasal deviation due to fracture.	1 1	1 1					1 1				
Removal of spur 1 Excision of turbinate 1 Submucous cauterization, chromic acid 1	Chronic rhinitis	3	3								3	
Kyle's operation	Hypertrophic rhinitis	1	1								1	
Cauterization, actual cautery 2 Resection, inferior turbinate 1	Hypertrophic turbinitis	3	3								3	
Incision and drainage	Abscess, nasal	1	1								1	
Removal with snare 1 Removal with curet 12 Adenectomy 12 Removal with snare 14	Adenoids, post nasal	25	25					20			4	1
Excision 3 Do	Polypus Exostosis	17 2	17 2								16 2	1
	Enchondroma	1	1								1	
Resection with saw Resection 2	Nasal spur	4	4								4	
Submucous resection 1 Excision with saw 1	Septal spur	4	4								4	
Curetment and cauterization.	Papilloma of septum	1	1								1	
	MOUTH AND PHARYNX.											
Ligation of lingual arteries, and suturing.	Excision of tongue by gunshot wound.	1	1					1				
Ligation of external carotid	Epithelioma of tongue	1	1					1				
Cauterization	Ulcer of tongue, tuberculous.	2	2								2	
Trephining and cleaning out dead bone.	Alveolar abscess, inferior maxilla.	1	1					1				
Incision and drainage	Submaxillary abscess	1	1								1	
Excision of gland	Piece of grass in submaxillary gland.	1[1]	1					1				
Excision	Ranula	1	1								1	
Cauterization	Dog bite of lips	1	1					1				
Amputation of uvula	Elongated uvula	5	5								5	
Tonsillectomy	Chronic tonsillitis Hypertrophy of tonsil	64 181	64 181				8 2	15 66			36 113	5

[1] Entered through Wharton's duct.

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1913*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Gas.	Local.	None.
	MOUTH AND PHARYNX—continued.											
Tonsillectomy..... 3 Incision..... 48	Peritonsillar abscess.....	51	51	...	...	...	1	...	...	...	20	30
Incision and drainage.....	Abscess of tonsil.....	22	22	...	...	...	1	...	...	...	10	11
	Ludwig's angina.....	3	3	...	...	...	...	2	...	...	...	1
Excision..... 5 Curetment..... 3	Adenoids.....	8	8	...	...	...	1	6	...	...	1	...
Excision.....	Papilloma.....	1	1	...	...	...	...	...	...	...	1	...
	NECK AND THORAX.											
Strumectomy..... 1 Right lobe..... 1 Left lobe..... 1 Partial..... 2 Right, with ligation of left superior thyroid artery..... 1 Ligation superior thyroid vessels..... 1	Goiter.....	3	3	...	...	...	...	2	...	...	1	...
	Exophthalmic goiter.....	4	4	...	...	...	...	4	...	...	...	...
Suturing..... 3 Tracheotomy..... 1	Incised wound of throat..	4	4	...	...	...	1	...	...	...	1	2
Internal and external suturing..... 1 Curetment and closure of wound..... 1	Incised wound of neck...	2	2	...	...	...	...	1	...	...	1	...
Incision of mucous membrane and extraction of bullet through mouth.	Gunshot wound of neck..	1	1	...	...	...	1	...	...	...	...	...
Amputation of epiglottis...	Epiglottiditis, tuberculous.	2	2	...	...	...	...	...	...	...	2	...
Cauterization of larynx.. 6 Injection of alcohol to induce paralysis of superior laryngeal nerve.... 2	Laryngitis, tuberculous..	8	8	...	...	...	...	...	...	...	8	...
Snaring.....	Polypus of vocal cords...	2	2	...	...	...	...	...	...	...	2	...
Aspiration..... 4 Paracentesis..... 1 Thoracoplasty..... 2 Resection of rib..... 11 Thoracotomy exploratory for diagnostic purposes with curetment of sinus..... 1	Empyema.....	19	16	2	...	1	4	7	...	3	2	3
Thoracotomy..... 1 Paracentesis..... 5 Aspiration..... 42 Resection of rib..... 2	Pleurisy.....	50	49	...	...	1	...	1	...	1	15	33
Pneumostomy with resection of rib for drainage.	Retention cyst of lung, due to pressure of carcinoma.	1	1	...	...	...	...	...	...	...	1	...
Paracentesis pericardii.....	Pericarditis.....	1	1	...	...	...	...	...	...	...	1	...
	ABDOMEN.											
Gastrojejunostomy..... Posterior, Mayo.....	Ulcer of the stomach.....	1	1	...	...	...	...	1	...	...	...	...
	Ulcer of the stomach with adhesions.	1	1	...	...	...	...	1	...	...	...	...
Gastrojejunostomy.....	Pyloric stenosis.....	1	1	...	...	...	...	1	...	...	...	...
Gastroenterostomy.....	Duodenal ulcer.....	1	1	...	...	...	...	1	...	...	...	...
Incision evacuation and drainage..... 9 Resection of rib; transpleural evacuation and drainage..... 5	Abscess of liver.....	14	12	...	...	2	...	12	...	...	2	...
Exploration of liver, resection of rib, liver entered through diaphragm.	Suspected abscess of liver.	1	1	...	...	...	...	1	...	...	...	...
Laparotomy exploratory...	Suspected abscess of liver; none found (diaphragmatic pleurisy).	1	1	...	...	...	...	1	...	...	...	...
	Cirrhosis of liver.....	1	...	...	1	...	...	1	...	...	...	...

TABLE NO. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1913*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Gas.	Local.	None.
	ABDOMEN—continued.											
Laparotomy exploratory 1 Cholecystectomy 1 Cholecystotomy and drainage 5	Cholecystitis	7	7					7				
Laparotomy, exploratory	Suspected cholecystitis; gall baldder normal.	1	1					1				
Cholecystectomy 2 Cholecystostomy 1 Do 1	Cholelithiasis (one a typhoid carrier).	3	3					3				
	Empyema of gall bladder	1	1					1				
Excision of fistulous tract	Biliary fistula	1			1			1				
Cholecystostomy 1 Cholecystenterostomy (anastomosis of gall bladder with jejunum) 1	Pancreatitis interstitial	2	2					2				
Lumbar incision and drainage.	Subphrenic abscess	1	1					1				
	Retro-cecal abscess	[1] 1				1		1				
Laparotomy exploratory	Suspected perforation of dysenteric ulcer.	1				1		1				
Puncture of ileum, evacuation of gas and drainage.	Peritonitis general, from perforated ulcer of ileum.	1				1		1				
Laparotomy 3 Laparotomy exploratory 2 Do 1	Peritonitis	5	3		1	1		5				
Appendectomy 1	Peritonitis tuberculous	2	1		1			2				
Resection of intestine	Gangrene of ileum	1	1					1				
Laparotomy exploratory	Septic condition	1	1					1				
Laparotomy	Peritoneal adhesions	1	1					1				
Excision of scar and separation of adhesions 1 Laparotomy and breaking up of adhesions 3	Adhesions following appendectomy.	4	4					3	1			
Division of bands	Intestinal adhesions	1				1		1				
Separation and division of adhesions about gall bladder and stomach.	Intra-abdominal adhesions following old gunshot wound.	1	1					1				
Laparotomy and anastomosis 1 Enterotomy 1	Volvulus	2	2					2				
Excision of adhesions, and application of liquid vaseline.	Intestinal obstruction caused by tuberculous peritonitis.	1	1					1				
Laparotomy exploratory	Intestinal obstruction	1	1					1				
Laparotomy with reduction of strangulated gut, and ligation of adhesions.	do	1			1			1				
Laparotomy and repair	Rupture second portion of duodenum.	1	1					1				
Spleenectomy	Rupture of spleen	1	1					1				
Resection of intestine and closure of lacerations in mesentery.	Contusion and laceration of ileum and mesentery.	1	1					1				
Suturing of diaphragm	Lacerated wound from gun explosion.	1				1		1				
Laparotomy exploratory 3 Laparotomy exploratory and suture of stomach 1 Laparotomy and repair 2 Laparotomy and drainage 1	Gunshot wound of abdomen.	7	5		2		2	5				
Laparotomy exploratory	Contusion of abdomen, severe.	1	1					1				

[1] Evacuation of pus; plastic operation on cecum; appendix not present; evidently amputated by amebic process.

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1913*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Gas.	Local.	None.
	ABDOMEN—continued.											
Laparotomy exploratory with curetment of fistula.	Chronic abdominal sinus following ligneous abscess.	1	1	...	...	...	1	...	...	...	...	...
Closure of fistula	Fecal fistula	2	...	...	2	...	...	2	...	...	...	...
Laparotomy and drainage	Abscess, iliac fossa	1	1	...	...	...	...	1	...	...	...	...
Laparotomy exploratory	Suspected lumbar abscess	1	1	...	...	...	1	...	...	...	...	...
Laparotomy and removal of tumor mass.	Hematoma of spleen	1	...	...	1	...	...	1	...	...	...	...
Exploration, left iliac region, incision and drainage of hemorrhagic contents.	Hematoma intra-abdominal.	1	1	...	...	...	...	1	...	...	...	...
Exploratory incision, with excision of old fistulous tract of abdominal wall.	Tumor cystic, nature undetermined.	1	1	...	...	...	...	1	...	...	...	...
	Tumor of intestines, nature undetermined.	1	...	...	1	...	...	1	...	...	...	...
Laparotomy exploratory	Lymphosarcoma of spleen and mesentery.	1	...	...	1	...	...	1	...	...	...	...
	Cyst tuberculous tail of pancreas.	1	...	...	...	1	...	1	...	...	...	...
Appendectomy 395 Incision, evacuation of abscess and drainage. 12	Appendicitis	407	404	1	...	2	20	379	5	1	2	...
Bassini's operation 171 Bassini's modified operation 14 Ferguson's operation 21 Ferguson's modified operation 4 Bloodgood's modified Ferguson's operation 2 Andrews's operation 5 Halstead's operation 7 Operation not stated 9	Inguinal hernia	233	232	...	1	...	15	218	...	...	...	...
Overlapping and repair 1 Muscle splitting and silver suture 1	Inguinal hernia, recurrent	2	2	...	...	...	...	2	...	...	...	...
Herniotomy, method not stated.	Inguinal hernia, strangulated, irreducible.	1	1	...	...	...	...	1	...	...	...	...
Flap operation 1 Mayo's operation 3 Bier's operation 1 Suture of separated muscles 1 Abdominal section freeing of adhesions and repair 2 Operation not stated 7	Ventral hernia (5 after appendectomy).	15	13	2	...	...	1	14	...	...	...	...
Mayo's operation 2 Mayo's modified operation 2 Wullstein's operation 1 Hayward Cushings's operation 1	Umbilical hernia (1 congenital).	5	5	...	...	...	...	5	...	...	...	...
Suturing of fascia lata 1	Femoral hernia	2	2	...	...	...	...	2	...	...	...	...
Suturing of conjoined tendon to Poupart's ligament.	Relaxation of internal inguinal ring.	1	1	...	...	...	...	1	...	...	...	...
	ANUS AND RECTUM.											
Cauterization 1 Curetment and drainage 3 Incision and drainage 34 Incision, curetment, and drainage 1 Incision and packing 1 Incision, curetment, and packing 1	Ischio-rectal abscess	41	41	...	...	...	4	12	...	...	17	8

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1913*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Gas.	Local.	None.
	ANUS AND RECTUM—con.											
Incision and drainage	Peri-rectal abscess	6	6	...	...	...	...	...	...	...	2	4
Incision and removal of scar tissue.	Rectal sinus, following ischio-rectal abscess.	1	1	...	...	...	...	1	...	...	...	...
Application of actual cautery.	Ulcer of rectum	2	2	...	...	...	...	2	...	...	...	...
Dissection of tract 6 Incision and curetment. 17 Excision 11 Excision and suture 9 Excision curetment and packing 2 Incision curetment and cauterization 1 Allingham's operation 3 Tract laid open with actual cautery 1 Excision of tract, removal of scar tissue and packing 3	Fistula in ano	53	52	1	...	...	4	43	...	...	6	...
Whitehead's operation	Prolapsus ani	1	1	...	...	...	...	1	...	...	...	...
Dilatation 3 Dilatation and cauterization 2 Dilatation and curetment 2 Dilatation curetment and cauterization 1	Fissure of anus	8	8	...	...	...	2	4	...	...	2	...
Incision of fibrous ring with dilatation.	Cicatricial contraction of anus.	1	1	...	...	...	...	1	...	...	...	...
Clamp and cautery 69 Excision 44 Excision and suture 51 Excision and ligation 39 Excision and cautery 1 Ligation 2 Ligation and excision 33 Ligation and incision 6 Clamp and suture 9 Incision and cautery 1 Incision and evacuation of clot 26 Pilcher's operation 2 Thewell-Thomas operation 3 Thompson's operation 5 Whitehead's operation. 1	Hemorrhoids	292	291	1	...	...	20	183	6	1	80	1
	GENITO-URINARY SYSTEM.											
High excision of veins. 150 Low excision of veins. 4 Excision, site not stated 8 High excision and curtailment of scrotum. 1	Varicocele	163	163	...	...	...	10	118	...	1	34	...
Aspiration 4 Aspiration and injection of phenol 1 Tapping 3 Excision of sac 10 Eversion of sac 1 Andrews's bottle operation 8 Jaboulay's operation 9 Von Bergmann's operation 2 Operation not stated 1	Hydrocele	39	38	...	1	...	1	24	...	...	14	...

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1913*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Gas.	Local.	None.
	GENITO-URINARY SYSTEM—continued.											
Orchidectomy	Atrophy of testicle	1	1	...	...	...	....	1	...	....	.....	...
	Tumor of testicle	1	1	...	...	...	....	1	...	....	.....	...
Do 1	Tuberculous testicle	3	2	...	1	...	....	3	...	....	.....	...
Orchotomy 2	Orchitis	3	3	...	...	...	....	2	....	....	1	...
Bevan's operation 1												
Orchidectabasis, surgical 1												
Excision veins of cord and fixing of testicle in scrotum 1	Undescended testicle	3	3	...	...	...	....	3	....	....	.....	...
Epididymectomy 22												
Epididymotomy 45												
Incision and multiple punctures 1												
Epididymis exposed and small drain inserted from globus major to globus minor 5	Epididymitis	73	73	...	...	...	2	53	1	5	12	...
Epididymectomy	Epididymitis tuberculous	2	1	...	1	...	....	2	....	....	.....	...
Excision of tumor	Tumor type undetermined gubernaculum testis.	1	1	...	...	...	....	1	....	....	.....	...
	Purulent cyst adherent to testis.	1	1	...	...	...	....	1	....	....	.....	...
Curetment and drainage	Old sinus following orchidectomy.	1	1	...	...	...	....	1	....	....	.....	...
Vasotomy	To cause sterility	2	2	...	...	...	....	2	....	....	.....	...
Nephrectomy	Nephritis, tuberculous	1	.....	...	...	1	....	1	....	....	.....	...
Do 1												
Nephrotomy 1	Nephrolithiasis	3	3	...	...	...	....	3	....	....	.....	...
Nephrolithectomy 1												
Nephrotomy and drainage	Pyonephrosis	2	2	...	...	...	....	2	....	....	.....	...
Suprapubic prostatectomy	Hypertrophy of prostate	1	.....	...	...	1	....	1	....	....	.....	...
Suprapubic cystotomy	Cystitis, chronic	1	1	...	...	...	....	1	....	....	.....	...
	Papilloma, soft, of bladder, recurrent.	2	2	...	...	...	....	2	....	....	.....	...
Prostatotomy	Prostatitis	1	1	...	...	...	....	1	....	....	.....	...
Perineal cystotomy	Rupture of urethra	1	1	...	...	...	....	1	....	....	.....	...
Incision and drainage	Perineal abscess	4	2	2	...	...	....	.....	....	....	3	1
Do 4												
Incision and cauterization 1	Periurethral abscess	6	6	...	...	...	1	1	....	1	2	1
Curetment and drainage 1												
Perineal section and suprapubic cystotomy.	Periurethral abscess, and retention of urine, due to stricture.	1	.....	1	...	...	....	1	....	....	.....	...
Excision without drainage.	Periurethral abscess, chronic, encysted.	1	1	...	...	...	....	.....	1	....	.....	...
Incision and drainage	Abscess of prostate	1	1	...	...	...	1	.....	....	....	.....	...
Incision, curetment, and placing permanent catheter in bladder.	Perineo-urethro-rectal fistula	1	1	...	...	...	....	1	....	....	.....	...
Perineal section 1												
Urethrotomy:												
External 5	Stricture of the urethra	14	13	1	...	...	....	9	....	....	4	1
Internal 3												
Rapid dilatation 5												
Meatotomy	Stricture of the meatus	5	5	...	...	...	....	.....	....	....	4	1
	Gonorrhea, acute	1	1	...	...	...	....	.....	....	....	1	...
Division of frenum	Congenital contraction of frenum.	1	1	...	...	...	....	1	....	....	.....	...
Dorsal incision and drainage.	Lacerated wound of frenum.	1	1	...	...	...	....	1	....	....	.....	...
Beck's operation 1	Hypospadias (one penile)	2	2	...	...	...	....	2	....	....	.....	...
Plastic closure 1												

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1913*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Gas.	Local.	None.
	GENITO-URINARY SYSTEM—continued.											
Circumcision	Phimosis and paraphimosis 234; Elongated, and redundant prepuce 137; Venereal sore 14; Posthitis, nonvenereal 8; Warts 4; Enuresis 1; Other diseases of foreskin 9	407	407				3	59		1	341	3
Dissection and retraction	Adherent prepuce	1	1								1	
Excision of edematous tissue	Edema of prepuce after repair of double hernia	1	1				1					
Resection of scrotum	Redundant scrotum	1	1								1	
Multiple incisions and drainage	Abscess of scrotum	1	1								1	
	VASCULAR SYSTEM.											
Ligation	Divided temporal artery	1	1									1
Do	Divided superficial palmar arch	1	1									1
Osteoplastic flap and removal of epidural clot	Subcranial hemorrhage	1	1					1				
Ligation of vessels	Secondary hemorrhage after operation for varicocele	2	2					2				
Excision of sac	Varicose aneurism	1	1					1				
Incision and drainage	Phlebitis	1	1									1
Excision 9; Ligation 1; Multiple ligation 3; Ligation and excision 27; Incision and section 1; Kellar's operation 5; Mayo's operation 2; Phelps's operation 1; Schede's modified operation 7; Trendelenberg's operation 3; Multiple ligation and partial dissection 1	Varicose veins	60	60					40	2		18	
	NERVOUS SYSTEM.											
Decompression	Tumor of brain	1	1					1				
Exploratory incision	do	1		1				1				
Trephining and drainage	Abscess of brain	1	1					1				
Osteoplastic flap and drainage	Laceration of cerebrum	1	1					1				
Laminectomy	Myelitis, traumatic	1				1		1				
Incision and breaking up of adhesions	Adhesions involving ulnar nerve	1	1					1				
Suturing of nerve	Severed musculo-spiral nerve	1			1			1				
Transplantation tendon of peroneus longus	Flexor paralysis of foot, resulting from old injury to sciatic nerve	1	1					1				
Neurectomy ilioinguinal nerve	Neuralgia	1	1					1				
Excision terminal portion of digital nerve	Painful amputation stump	1	1								1	

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officer and enlisted men of the Army during the calendar year 1915*—Continued.

Operation.	Disease or injury.	Cases.	Result.			Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Gas.	Local.	None.
	SKIN AND CELLULAR TISSUE.											
Incision and drainage. 258 Incision and curetment 8 Multiple incisions..... 1 Excision..... 1 Do..... 4	Abscess.....	268	268	...	...	...	4	16	2	1	120	125
Incision and drainage.. 17 Incision and curetment. 6 Incision and packing... 1	Carbuncle.....	27	27	...	...	...	....	3	....	....	12	12
Incision and drainage.. 91 Multiple incisions and drainage..... 6	Cellulitis.....	98	98	...	...	...	3	13	....	....	40	42
Counter incisions.....	Abscess metastatic, iliac region and thigh.	1	1	...	...	...	....	1	....	....	....	...
Incision and drainage... 1 Exploratory incision.... 1	Abscess, tuberculous.....	2	2	...	...	...	....	2	....	....	....	...
Multiple incisions and drainage.	Aerogenes capsulatus infection.	1	1	...	...	...	....	1	....	....	....	...
Incision and drainage.....	Sporotrichosis.....	1	1	...	...	...	....	....	....	....	1	...
Incision and dissection.....	Fistula.....	1	1	...	...	...	....	1	....	....	....	...
Excision 1, curetment... 1	Sinus.....	2	2	...	...	...	....	1	....	....	1	...
Extirpation..... 2 Dissection..... 1	Ulcer.....	4	4	...	...	...	....	2	....	....	2	...
Incision and curetment.. 1 Incision and drainage.. 5 Removal of nail..... 2	Onychia.....	7	7	...	...	...	1	1	....	....	5	...
Excision..... 100 Partial excision..... 117 Excision and curetment..... 2 Avulsion..... 13 Hinged and elevated.. 1 Anger's operation..... 6 Cotting's operation.... 20 Keller's operation..... 9 Von Bergmann's operation..... 7	Ingrowing toe nail.....	275	275	...	...	...	4	19	2	2	241	7
Excision.....	Deformed toe nail.....	4	4	...	...	...	....	....	....	....	4	...
Partial excision and curetment.	Painful scar.....	4	4	...	...	...	....	2	....	....	2	...
Excision of adherent scar...	Old broken down scar...	2	2	...	...	...	....	....	....	....	2	...
	Skin deformity of wrist following compound fracture.	1	1	...	...	...	....	....	....	....	1	...
Excision.....	Callus.....	6	6	...	...	...	....	2	....	....	1	3
Avulsion.....	Keloid.....	2	2	...	...	...	....	1	....	....	1	...
Excision.....	Keratosis.....	1	1	...	...	...	....	....	....	....	1	...
	Verruca.....	11	10	...	1	...	....	....	....	....	11	...
	LYMPHATIC SYSTEM.											
Incision and drainage 334 Incision and curetment 70 Adenectomy..... 193 Bassini's operation.... 3	Adenitis inguinal venereal..... 421 Adenitis inguinal nonvenereal..... 83 Adenitis inguinal traumatic..... 2 Adenitis various other locations.... 19 Adenitis site and nature not stated.. 75	600	599	1	...	...	24	152	2	12	283	127
Incision curetment and drainage..... 3 Adenectomy..... 5	Adenitis tuberculous.....	8	6	2	...	...	1	3	....	....	4	...
Incision and drainage.....	Lymphangitis.....	3	3	...	...	...	....	....	....	....	3	...

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1913*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Gas.	Local.	None.
	MUSCLES, TENDONS, FASCIÆ, LIGAMENTS, AND BURSÆ.											
Suturing of muscles	Incised wound of lumbar muscles.	1	1									1
Excision of torn portion	Adductor longus torn from insertion.	1	1					1				
Repair of diastasis	Diastasis of recti muscles.	1	1					1				
Incision and suturing	Rupture of popliteal fascia	1	1					1				
enorrhaphy	Severed tendons	12	8	4				8			3	1
xcision of sac	Bursa	5	5					2			3	
Incision and drainage	Bursitis	6	6					2			3	1
Excision of bursa 3 Keller's operation 2 Mayo's operation 1	Bunion	6	5		1			5			1	
Excision of ossified area	Ossification partial, ligamentum patellæ.	1	1					1				
Excision	Calculous deposit buccinator muscle.	1	1								1	
esection 1 notomy flexor tendons 2 notomy extensor tendons	Hammer toe	3	3					1			2	
	Overlapping little toe	2	2								2	
notomy	Deformed toe	1	1								1	
	Flexed finger joint	1	1								1	
Excision	Cyst tendon sheath, peroneus.	1	1					1				
	Ganglion	7	7				1	1			5	
	BONES.											
Excision of depressed bone.	Depressed fracture of skull.	1	1					1				
Removal of fragments	Depressed temporal and parietal bones.	1				1		1				
Craniotomy	Fracture, simple, fissured from angle left orbit to left parietal eminence.	1	1					1				
Exploratory incision	Stellate fracture, simple, inner table, right parietal bone.	1	1					1				
Trephining curetment and drainage.	Necrosis outer table of skull.	1	1				1					
ncision and elevation	Fracture, simple depressed, zygomatic process.	1	1					1				
	Fracture, fifth and sixth cervical vertebræ.	1			1			1				
Laminectomy	Fracture, simple complete, twelfth dorsal and first lumbar vertebræ.	1	1					1				
Osteotomy, resetting and wiring.	Fracture, simple, clavicle, non-union.	1	1					1				
Application of Lane bone plate 1 Incision and wiring of detached fragments 1 Removal portion of clavicle and wiring of fragments 1	Fracture, comminuted of clavicle.	3	3					2	1			
Resection of projecting bone.	Fracture, old, of clavicle with angular deformity.	1	1					1				
Application of Lane bone plate.	Fracture, simple transverse, of humerus, unreduced.	1	1					1				

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1913*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Gas.	Local.	None.
	BONES—continued.											
Incision and removal of callus.	Fracture, outer condyle of humerus with bony callus in front of elbow joint.	1	1					1				
Freshening and wiring of fragments.	Fracture, ununited of olecranon.	1	1					1				
Squaring broken ends and suturing with silver wire.	Fracture, both bones of forearm.	1	1					1				
Application of Lane bone plate.	Fracture, simple, of radius, and comminuted of ulna.	1	1					1				
Excision, excess of callus...	Fracture, old, both bones forearm with angular deformity.	1	1					1				
	Angular deformity, marked middle third forearm.	1		1				1				
Excision fragment of bone..	Fracture, head of radius..	1	1					1				
Incision and wiring of fragments.	Fracture of radius.....	1	1					1				
Application of Lane bone plate.	Fracture of radius with interposed muscle.	1	1					1				
Wiring of fragments.....	Fracture, compound, comminuted of ulna.	1	1				1					
Excision bone fragments and suturing.	Gunshot fracture of wrist.	1	1								1	
Removal of bone fragments.	Fracture of carpus.....	1	1					1				
Incision, removal of tendon from between fragments and setting of fracture.	Fracture, comminuted of femur with interposed tendon.	2	2					2				
Application of Lane bone plate..... 1 Intermedullary bone splint..... 1 Reduction and wiring... 1 Removal of Lane bone plate..... 1	Fracture of femur.....	4	4					2	1		1	
Application of Lane bone plate.	Fracture of femur, ununited.	1	1					1				
Purse-string suture, silver wire..... 1 Wiring, Murphy's method..... 1 Suturing of aponeurosis with kangaroo tendon. 1 Incision, drainage, and fixation with plaster.. 1	Fracture of patella.....	3	3					3				
Squaring fractured ends and suturing of fragments..... 1 Removal of Lane bone plate..... 1	Fracture, compound, both bones of leg.	3	3					3				
Resection.....	Fracture compound comminuted, both bones of leg.	1			1			1				
Reduction and removal of fragments.	Fracture, comminuted, both bones of leg.	1	1					1				
Incision and wiring of fragments.	Fracture, simple, both bones of leg.	2	1	1				2				
Incision, exploratory.... 1 Incision and wiring..... 1 Freshening of fragments and application of Lane bone plate 1	Fracture, ununited, of tibia and fibula.	3	1		2		1	2				

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1913*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Gas.	Local.	None.
	BONES—continued.											
Removal of bone fragments 1 Application of Lane bone plate 1 Removal of Lane bone plate 1 Incision and wiring of fragments 1 Freshening ends of fragments, and application of Lane bone plate 1	Fracture, compound, of tibia.	2	2				1	1				
	Fracture, simple, of tibia.	3	3					3				
Removal of Lane bone plate.	Fracture of tibia and fibula.	1	1					1				
Removal of bullet and bone splinters.	Gunshot wound involving astragalus.	1	1									1
Incision and removal remaining portions of metacarpal.	Gunshot wound of hand, carrying away finger and distal end of metacarpal.	1	1					1				
Osteotomy	Fracture, old, metacarpal of index finger with deformity.	1	1					1				
Removal of detached fragment.	Fracture, old, fifth metacarpal.	1	1					1				
Incision and removal spicula of bone.	Sprain-fracture proximal end first metacarpal.	1	1					1				
Wiring of fragments	Fracture, compound, of finger.	1	1								1	
Wiring of metacarpal bones.	Deformity of second and third metacarpals.	1	1					1				
Excision of scaphoid	Fracture of scaphoid	2	2					2				
Resection	Fracture second metatarsal.	1	1								1	
Removal of metatarsal fragment.	Gunshot wound of foot	1	1					1				
Removal of callus and intervening tissues, freshening bone ends, and plating.	Fracture with mal-union, bone not stated.	1	1					1				
Suturing of bone	Fracture, bone not stated.	1	1					1				
Incision, curetment, and drainage.	Caries of rib	1	1					1				
Exploratory incision	Suspected caries of tibia	1	1					1				
Curetment	Osteomyelitis	1	1					1				
Incision and drainage	Osteomyelitis, tuberculous.	1	1					1				
Incision, curetment, and drainage.	Osteoperiostitis	3	3								3	
Excision of diseased bone. 2 Incision and curetment 3 Incision and removal of dead bone 4	Necrosis	9	8		1		1	6			2	
Curetment and drainage	Necrosis, screw holes, Lane bone plate.	2	2					2				
Removal of necrotic bone, and curetment of sinus.	Sinus following bone transplantation.	1		1				1				
Removal of Lane bone plate and obliteration of sinus.	Sinus, discharging, from bone plating of tibia.	1	1								1	
Curetment and drainage	Sinus, sacral	1	1					1				
Incision and packing 1 Incision and curetment 3 Incision, curetment, and packing 1 Incision and drainage 10	Periostitis	15	15				1	4	1		7	2
Sequestrotomy	Periostitis with formation of sequestrum.	1	1								1	
Osteotomy	Exostosis	6	6					3			3	
Excision of bone	Painful sesamoid	2	2					2				

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1913*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Gas.	Local.	None.
	BONES—continued.											
Incision and curetment	Abscess, subperiosteal, with necrosis.	1	1					1				
Incision and drainage 2 Laparotomy exploratory 1	Psoas abscess	3	3					2			1	
	JOINTS.											
Suturing of bones	Dislocation, acromio-clavicular.	2	2					2				
Pleating anterior surface	Dislocation, subglenoid, recurrent.	1	1						1			
Freeing of adhesions	Ankylosis temporo-maxillary joint.	1	1					1				
Arthrotomy with drainage 1 Arthrotomy and removal of bone marrow for examination 1	Arthritis, acute, elbow joint.	2	2					1			1	
Arthrotomy and removal	Fragment of bone between articular surfaces of elbow joint.	1	1					1				
Excision and removal of loose portion.	Fracture of semilunar cartilage knee joint.	1	1					1				
Incision and removal	Dislocation of semilunar cartilage.	3	3					3				
	Floating cartilage knee joint.	2	2				1	1				
Release of patella, with interposition of fascial flap.	Ankylosis of knee following fracture.	1	1					1				
Aspiration	Arthritis knee joint	1	1									1
Arthrotomy exploratory	Synovitis knee joint	1	1					1				
Incision and removal of floating cartilage.	Synovitis and floating cartilage of knee joint.	1	1					1				
Plication internal lateral ligament.	Relaxed lateral ligament knee joint.	1	1					1				
Mayo's operation 22 Keller's operation 1 Resection of joint, and interposition of flaps of fasciæ from bursa 2 Excision of exostosis 3 Resection 4 Tenotomy, flexor tendon 1 Tenotomy and resection 1 Resection interphalangeal joint 2	Hallux valgus	25	25					19	3		3	
	Hallux valgus with exostosis.	7	7					7				
	Hammer toe	4	4					3			1	
Resection proximal end of phalanx.	Ankylosis metatarso-phalangeal joint, great toe.	1	1					1				
Excision outer portion head of metatarsal.	Enlargement metatarso-phalangeal joint, fifth toe.	2	2					2				
Suturing	Incised wound, excising distal extremity second phalanx, index finger.	1	1									1
Tenotomy and tenorrhaphy.	Permanent flexion of finger.	1	1					1				
Incision, curetment, and drainage.	Arthritis metacarpo-phalangeal.	1	1					1				
Murphy's operation for stiff joint.	Ankylosis distal joint ring finger.	1	1					1				
Freeing of adhesions	Ankylosis third metacarpal joint.	1	1					1				
Reduction and suture of wound.	Dislocation proximal interphalangeal joint of forefinger.	1	1									1

TABLE NO. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1913*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Gas.	Local.	None.
	AMPUTATIONS.											
Amputations:												
Arm, site not stated	Fracture compound comminuted humerus.	[1] 1	....	...	...	1	....	1	....	....	.....	...
Arm, middle third	Gunshot wound of arm	1	1	...	...	...	....	1	....	....	.....	...
Both thighs, site not stated.	Lacerated wounds of thighs.	1	....	...	...	1	....	1	....	....	.....	...
Thigh, upper third	Necrosis both bones of leg.	1	1	...	...	...	....	1	....	....	.....	...
	Gunshot wound through knee joint.	1	1	...	...	...	....	1	....	....	.....	...
Thigh, middle third	Gangrene of leg	1	1	...	...	...	....	1	....	....	.....	...
	Septicemia following gunshot wound.	1	....	...	...	1	1	....	....	....	.....	...
Leg, 3 inches below knee and removal remaining portion of fibula.	Necrosis both bones of leg.	1	1	...	...	...	....	1	....	....	.....	...
Leg, site not stated	Crushing of foot and ankle.	1	1	...	...	...	....	1	....	....	.....	...
Disarticulation of foot at ankle joint (Syme).	Necrosis of metatarsal bones.	1	1	...	...	...	....	....	....	....	1	...
Amputation of finger	Gunshot wound 5; Incised wound 3; Lacerated wound 8; Fracture 4; Crushing 4; Other injury 5; Disease 8	37	37	...	...	...	2	25	....	....	10	...
Amputation of toe	Gunshot wound 2; Crushing [2] 1; Freezing [3] 1; Other traumatism 1; Gangrene of toe 1; Hammer toe 20; Overriding toe 5; Other diseases 2; Cause not stated 2	35	35	...	...	...	6	13	....	1	15	...
	FOREIGN BODIES.											
Extraction of bullet 6; Incision and extraction 8; Exploration, bullet not found 2	Bullet	16	14	...	2	...	....	7	....	....	8	1
Incision and extraction	Fragment of bullet	5	5	...	...	...	....	2	....	....	2	1
	Fragment of cartridge shell.	3	2	...	1	...	....	1	....	....	2	...
	Bird shot	2	2	...	...	...	....	.....	....	....	1	1
	Knife blade	1	1	...	...	...	....	1	....	....	.....	...
	Steel pin	1	1	...	...	...	....	.....	....	....	1	...
Esophagoscopy and removal	Bone lodged in esophagus.	1	1	...	...	...	....	1	....	....	.....	...
Incision and removal of ligatures.	Irritating unabsorbed ligatures following operation for varicocele.	1	1	...	...	...	....	1	....	....	.....	...
Incision and removal portion of graphite of lead pencil 1; Incision and effort to remove piece of metal 1	Punctured wound, with retention of foreign body.	2	1	...	1	...	....	1	....	....	1	...
	TUMORS.											
Excision	Epithelioma	3	3	...	...	...	....	1	....	....	2	...
	Sarcoma of leg	1	1	...	...	...	....	.....	....	....	1	...
Partial excision and packing	Tumor parotid, mixed	1	1	...	...	...	....	1	....	....	.....	...
Excision	Adenoma	2	2	...	...	...	....	1	....	....	1	...
	Adenofibroma	1	1	...	...	...	....	1	....	....	.....	...
	Cystic tumor	1	1	...	...	...	....	.....	....	....	1	...

[1] Also sustained a compound fracture of skull.
[2] Amputation second, third, fourth, and fifth toes at metatarsophalangeal articulation.
[3] Amputation all toes both feet through first phalanx.

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1913*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether	Chloroform and ether	Gas.	Local.	None.
	TUMORS—continued.											
Excision 4 Incision and cauterization 1 Incision and drainage 2	Cyst	7	7					1			4	2
Excision	Dermoid cyst	1	1					1				
	Fibroma	2	2					1			1	
	Hemangioma	1	1								1	
Aspiration 2 Incision and drainage 3 Excision	Hematoma	5	5					1			1	3
	Hygroma	1	1					1				
Do 15 Dissection 1 Excision and suture 1 Excision	Lipoma	17	17				1	5			10	1
	Papilloma	8	8					2			5	1
Excision of portion for examination 1 Osteotomy 2 Incision and curetment 1 Incision and cauterization 1 Incision and drainage 7 Excision 43	Osteoma	3	3					2			1	
	Sebaceous cyst	52	52				1	5			44	2
Do	Tumor parotid gland, type unknown.	1	1					1				
Incision and resection 1 Excision 1	Tumor, type undetermined.	2	2								2	
Do	Tumor, nature not stated	2	2					2				
	PLASTIC OPERATIONS.											
	Lacerated wounds with extensive denudation.	1	1								1	
Thiersch's operation	Burns, second degree, thighs and legs.	1	1					1				
	Excised carbuncle	1	1					1				
	Dissected ulcer	1	1					1				
Do 1 Plastic to close 1 Excision and skin grafting	Typhoid ulcer	2	2					2				
	Ulcer	1	1					1				
	MISCELLANEOUS.											
Removal of necrotic skin flap.	Necrosis following amputation of toes.	1	1					1				
Suturing	Incised wound	45	45				2				6	37
Cleansing and suturing	Lacerated wound	54	54					3			6	45
Incision and drainage 2 Incision and curetment 3 Incision and cauterization 3	Punctured wound	8	8					1			7	
Restoration of fingers	Extensive lacerations of hand.	2	2					2				
Suturing and drainage 1 Incision and drainage 1	Gunshot wound	2	2				1	1				
Do	Infected wound	10	9		1						4	6
Excision of mass	Indurated mass following injection of salvarsan.	1	1								1	
Total number of cases		4,723	4,650	22	30	21	171	1,937	30	42	1,997	546

TABLE No. 67.—*Numerical view of the effect of disease and injury on United States troops serving at home and abroad, in the year 1913, compared with the corresponding data for the year 1912, by races.*

ABSOLUTE NUMBERS.

		Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Noneffective from sickness.	
			Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Days treated.	Constantly noneffective.
White troops	1913	76,135	50,737	40,343	10,394	1,021	919	102	370	192	178	1,391	1,111	280	665,985	1,824.62
	1912	74,366	60,668	49,669	10,999	1,042	945	97	353	175	178	1,395	1,120	275	814,538	2,225.51
Colored troops	1913	4,631	3,520	2,888	632	61	56	5	27	18	9	88	74	14	51,164	140.18
	1912	3,901	3,819	3,106	713	27	25	2	28	14	14	55	39	16	47,683	130.28
Porto Rican troops	1913	594	486	434	52	5	4	1	2	2	.....	7	6	1	5,329	14.60
	1912	588	672	610	62	4	4	.....	2	.....	2	6	4	2	6,042	16.51
Philippine Scouts	1913	5,096	3,471	2,983	488	48	45	3	48	14	34	96	59	37	34,050	93.29
	1912	5,407	3,667	3,337	330	45	38	7	24	17	7	69	55	14	40,210	109.86

PROPORTIONATE NUMBERS.

[Ratios per 1,000 of mean strength.]

		Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Constantly noneffective.	Days treated.	
			Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.		Each soldier.	Each case.
White troops	1913	76,135	666.41	529.89	136.52	13.25	11.92	1.32	4.80	2.49	2.31	18.05	14.41	3.63	23.97	8.75	13.13
	1912	74,366	815.80	667.90	147.90	13.76	12.48	1.28	4.66	2.31	2.35	18.42	14.79	3.63	29.93	10.95	13.43
Colored troops	1913	4,631	760.10	623.62	136.47	13.17	12.09	1.08	5.83	3.89	1.94	19.00	15.98	3.02	30.27	11.05	14.54
	1912	3,901	978.98	796.21	182.77	6.92	6.41	.51	7.18	3.59	3.59	14.10	10.00	4.10	33.40	12.22	12.49
Porto Rican troops	1913	594	818.18	730.64	87.54	8.42	6.73	1.68	3.37	3.37	.....	11.79	10.10	1.68	24.58	8.97	10.97
	1912	588	1,142.86	1,037.41	105.44	6.80	6.80	.....	3.40	.....	3.40	10.20	6.80	3.40	28.08	10.26	8.99
Philippine Scouts	1913	5,096	681.12	585.36	95.76	9.17	8.59	.57	9.17	2.67	6.49	18.34	11.26	7.06	18.31	6.68	9.81
	1912	5,407	678.20	617.16	61.04	8.19	6.92	1.27	4.37	3.09	1.27	12.56	10.01	2.54	20.32	7.44	10.96

TABLE NO. 68.—*Admissions to sick report, discharges, and deaths, with ratios per 1,000 of mean strength, in which all available data for the decade ending Dec. 31, 1912, are placed in comparison with the year 1913.*

Causes of admission to sick report.	The Army, 1903-1912. [American troops, enlisted men.]						The Army, 1913. [American troops, enlisted men.]					
Mean strength	S. G. O., 655,804—A. G. O., 667,223.						S. G. O., 80,766—A. G. O., 81,697.					
	Admissions.		Discharges.		Deaths.		Admissions.		Discharges.		Deaths.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Typhoid fever	2,095	3.19	8	0.01	159	0.24	4	0.05				
Malarial fevers (total)	46,014	70.16	13	.02	69	.10	1,999	24.74	1	0.01	2	0.02
Intermittent	37,004	56.43			4	.01	1,435	17.77				
Estivo-autumnal	8,089	12.33			61	.09	412	5.10			2	.02
Other malarial fevers	921	1.40	13	.02	4	.01	152	1.88	1	.01		
Smallpox	133	.20			8	.01	8	.10			2	.02
Measles	6,269	9.56	9	.01	70	.10	520	6.44	1	.01	11	.13
Eruptive fevers, others	1,478	2.25			2	.003	241	2.98				
Diphtheria	383	.58	1	.001	7	.01	23	.28				
Influenza	17,382	26.50			5	.01	1,221	15.11				
Asiatic cholera	185	.28			111	.17	1	.01			1	.01
Cholera nostras	112	.17										
Dysentery	8,520	12.99	220	.33	112	.17	309	3.83	3	.04	7	.09
Yellow fever	30	.05			6	.01						
Leprosy	3	.005	2	.003	1	.001						
Beriberi	649	9.90	9	.01	28	.04						
Erysipelas	449	6.85	1	.001	10	.01	41	.51				
Dengue	12,758	19.45			1	.001	452	5.60				
Mumps	7,295	11.12	1	.001			634	7.85				
Cerebrospinal fever, including meningitis	161	.25	15	.02	92	.14	35	.43	3	.04	11	.12
Purulent infection and septicemia	96	.15	5	.01	45	.07	9	.11	1	.01	5	.06
Tuberculosis, all	2,888	4.40	1,788	2.68	349	.52	296	3.66	185	2.26	40	.49
Venereal (all)	118,056	180.02	1,732	2.60	39	.06	7,852	97.22	92	1.13	5	.06
Syphilis and its results	20,609	31.43	1,110	1.66	34	.05	1,875	23.22	32	.39	5	.06
Chancroid and its results	22,015	33.57	12	.02	1	.001	1,510	18.69	1	.01		
Gonorrhea and its results	75,432	115.02	610	.91	4	.01	4,467	55.31	59	.72		
Cancer and other malignant growths	141	.22	26	.04	58	.09	16	.20	5	.06	6	.07
Rheumatism, acute articular	5,515	8.41	12	.02	8	.01	430	5.32	4	.05		
Rheumatism, chronic articular	3,345	5.10	279	.42	1	.001	117	1.45	13	.16		
Alcoholism and its results	16,942	25.83	159	.24	95	.14	1,216	15.06	18	.22	3	.04
Diseases of the brain and spinal cord	1,832	2.79	1,135	1.70	52	.08	56	.69	24	.29	2	.02
Tetanus	9	.01			7	.01						
Diseases of the heart	3,194	4.87	837	1.25	172	.26	112	1.39	35	.43	17	.21

TABLE No. 68.—*Admissions to sick report, discharges, and deaths, with ratios per 1,000 of mean strength, in which all available data for the decade ending Dec. 31, 1912, are placed in comparison with the year 1913*—Continued.

Causes of admission to sick report.	The Army, 1903-1912. [American troops, enlisted men.]						The Army, 1913. [American troops, enlisted men.]					
Mean strength	S. G. O., 655,804—A. G. O., 667,223.						S. G. O., 80,766—A. G. O., 81,697.					
	Admissions.		Discharges.		Deaths.		Admissions.		Discharges.		Deaths.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Varicocele	2,526	3.85	27	0.04	.....	.....	209	2.59	1	0.01	.....	.....
Adenitis, nonvenereal	4,083	6.23	.....	.....	.....	.....	415	5.14	.....	.....	.....	.....
Lymphangitis	261	.40	1	.001	.....	.....	30	.37	.....	.....	.....	.....
Coryza and other diseases of nasal fossae	13,385	20.41	55	.09	.....	.....	779	9.65	.....	.....	.....	.....
Bronchitis, acute and chronic	27,353	41.71	48	.07	6	0.01	2,457	30.42	6	.07	.....	.....
Pneumonia (all)	1,836	2.80	4	.01	253	.38	202	2.50	3	.04	26	0.32
Pleurisy	1,922	2.93	52	.08	18	.03	212	2.62	7	.09	4	.05
Tonsillitis and other diseases of the pharynx	43,256	65.96	2	.003	2	.003	3,919	48.52	1	.01	.....	.....
Gastritis	8,444	12.88	53	.08	5	.01	962	11.91	1	.01	.....	.....
Diarrhea and enteritis	40,714	62.08	74	.11	35	.05	2,578	31.92	2	.02	4	.05
Peritonitis, simple	43	.07	3	.004	15	.02	6	.07	.....	.....	2	.02
Hernia	2,910	4.44	391	.59	11	.02	291	3.60	13	.06	5	.06
Appendicitis	3,238	4.94	39	.06	78	.12	580	7.18	4	.05	9	.11
Diseases of the kidneys	1,037	1.58	139	.21	112	.17	91	1.13	19	.23	17	.21
Periostitis	541	.82	22	.03	.....	.....	61	.76	2	.02	.....	.....
Arthritis and synovitis	2,408	3.67	125	.19	.....	.....	264	3.27	12	.15	.....	.....
All other diseases	203,097	309.69	4,097	6.14	273	.41	14,583	180.56	519	6.35	31	.38
Total for disease	612,988	934.71	11,384	17.06	2,315	3.47	43,231	535.26	975	11.93	210	2.57
Total for injuries	133,320	203.29	1,274	1.91	1,598	2.39	1,026	136.52	107	1.31	187	2.29
Grand total	746,308	1,138.00	12,658	18.97	3,913	5.86	54,257	671.78	1,082	13.24	397	4.86

TABLE 68½.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with cluding American, Porto Rican, and Philip-*

Serial Nos.	International classification.	Causes of admission to sick report.	Officers, Army. Mean strength..... S. G. O., 4296—A. G. O., 4787. Admissions. Number.	Admissions. Ratio.	Retirement for disability. Number.	Retirement for disability. Ratio.	Deaths. Number.	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
1	1	Typhoid fever							0.06	0.01
2	1a	Paratyphoid fever								
5	2	Typhus fever								
7–11	4	Malaria	59	13.73	1	0.21			1.66	.39
7		Estivo-autumnal fever	18	4.19					.51	.12
8		Malarial cachexia	1	.23	1	.21			.00	.00
9		Quartan malarial fever								
10		Tertian malarial fever	34	7.91					.93	.22
11		Undetermined malarial fever	6	1.40					.22	.05
12	5	Smallpox and varioloid								
13	5b	Vaccinia								
14	6	Measles	2	.47					.12	.03
15	7	Scarlet fever								
17	9	Diphtheria	2	.47					.10	.02
18	10	Influenza	182	42.37					3.00	.70
19	12	Asiatic cholera								
21–23	14	Dysentery	16	3.72					1.55	.36
21		Bacillary	1	.23					.02	.00
22		Entamebic	13	3.03					1.41	.33
23		Unclassified	2	.47					.12	.03
27	18	Erysipelas	2	.47					.02	.00
29	19b	Dengue	38	8.85					.63	.15
31	19d	German measles	2	.47					.06	.01
34	19g	Mumps	8	1.86					.29	.07
37	20	Purulent infection and septicemia	2	.47			1	0.21	.35	.08
42–46	25	Mycoses								
47		Pellagra								
49–57	28–34	Tuberculosis, all	12	2.79	2	.42	1	.21	10.34	2.41
49–51	28	Tuberculosis of lungs	11	2.56	2	.42			10.03	2.33
52	29	Miliary tuberculosis, acute	1	.23			1	.21	.15	.04
53–57	30–34	Tuberculosis of other organs							.16	.04
59–74	37–38	Venereal diseases, all	20	4.66					.73	.17
59–64	37	Syphilis	11	2.56					.34	08
65–67	38a	Soft chancre								
68–74	38b	Gonococcus infection	9	2.09					.39	.09
75–79	39–45	Cancer and other malignant tumors	2	.47			1	.21	.93	.22
80	46	Benign tumors	5	1.16					.31	.07
81–85	47–48	Rheumatism, articular, all	23	5.35					1.63	.38
81–82	47	Acute articular rheumatism	10	2.33					.84	.20
83–85	48	Chronic articular rheumatism	13	3.03					.79	.18
87–88	50	Diabetes	3	.70					1.06	.25
89	51	Exophthalmic goiter	1	.23					.63	.15
97–100	56	Alcoholism and results	10	2.33					.28	.07
101–102	57–58	Chronic occupational poisoning								
103–104	59	Other chronic poisoning, including drug habit	1	.23					.08	.02
105–106	60	Encephalitis								
107	61	Simple meningitis	1	.23					.01	.00
108	61a	Epidemic cerebrospinal meningitis								
109	62	Locomotor ataxia	1	.23	2	.42			.32	.07
110–115	63	Other diseases of spinal cord								
116	64	Cerebral hemorrhage, apoplexy	1	.23					.04	.01
117–119	66	Paralysis without specified cause	1	.23					.09	.02
120–126	67–68	Mental alienation	9	2.09	5	1.04	1	.21	2.42	.56
127	69	Epilepsy	4	.93					.25	.06
129–133	73	Neuralgia and neuritis	42	9.78					2.85	.66
138–141	75a	Conjunctivitis	13	3.03					.35	.08
142	75b	Trachoma								
166	77	Pericarditis								
167	78	Acute endocarditis	1	.23					.17	.04
169–174	79	Organic heart disease	7	1.63	6	1.25	2	.42	1.49	.35
175	80	Angina pectoris	1	.23			1	.21	.16	.04

ratios per 1,000 of mean strength, for the Army; separately for officers, total enlisted (in-pine troops), and grand total, year 1913.

Total enlisted men (American, Porto Rican, and Scouts).								Grand total, the Army.							
S. G. O., 86456—A. G. O., 87527.								S. G. O., 90752—A. G. O., 92314.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
4	0.05	.....	.....	.....	.....	0.65	0.01	4	0.04	.....	.....	.....	.....	0.72	0.01
6	.07	.....	.....	.....	.....	.75	.01	6	.07	.....	.....	.....	.....	.75	.01
3	.03	.....	.....	.....	.....	.52	.01	3	.03	.....	.....	.....	.....	.52	.01
3,004	34.75	1	0.01	5	0.06	59.82	.69	3,063	33.75	1	0.01	5	0.05	61.48	.68
637	7.37	.....	.....	3	.03	17.82	.21	655	7.22	.....	.....	3	.03	18.34	.20
16	.19	1	.01	.....	.....	2.05	.02	17	.19	1	.01	.....	.....	2.05	.02
47	.54	.....	.....	1	.01	.87	.01	47	.52	.....	.....	1	.01	.87	.01
2,125	24.58	.....	.....	1	.01	36.22	.42	2,159	23.79	.....	.....	1	.01	37.15	.41
179	2.07	.....	.....	.....	.....	2.86	.03	185	2.04	.....	.....	.....	.....	3.09	.03
15	.17	.....	.....	3	.03	1.10	.01	15	.17	.....	.....	3	.03	1.10	.01
711	8.22	.....	.....	.....	.....	9.32	.11	711	7.83	.....	.....	.....	.....	9.32	.10
520	6.01	1	.01	11	.13	28.77	.33	522	5.75	1	.01	11	.12	28.88	.32
4	.05	.....	.....	.....	.....	.56	.01	4	.04	.....	.....	.....	.....	.56	.01
23	.27	.....	.....	.....	.....	1.21	.01	25	.28	.....	.....	.....	.....	1.31	.01
1,242	14.37	.....	.....	.....	.....	18.09	.21	1,424	15.69	.....	.....	.....	.....	21.10	.23
1	.01	.....	.....	1	.01	.01	.00	1	.01	.....	.....	1	.01	.01	.00
350	4.05	3	.03	7	.08	22.25	.26	366	4.03	3	.03	7	.08	23.80	.26
25	.29	.....	.....	.....	.....	1.65	.02	26	.29	.....	.....	.....	.....	1.67	.02
265	3.07	3	.03	7	.08	18.82	.22	278	3.06	3	.03	7	.08	20.24	.22
60	.69	.....	.....	.....	.....	1.77	.02	62	.68	.....	.....	.....	.....	1.90	.02
41	.47	.....	.....	.....	.....	2.41	.03	43	.47	.....	.....	.....	.....	2.43	.03
517	5.98	.....	.....	.....	.....	7.42	.09	555	6.12	.....	.....	.....	.....	8.05	.09
197	2.28	.....	.....	.....	.....	5.10	.06	199	2.19	.....	.....	.....	.....	5.16	.06
698	8.07	.....	.....	.....	.....	32.50	.38	706	7.78	.....	.....	.....	.....	32.79	.36
11	.13	1	.01	8	.09	1.18	.01	13	.14	1	.01	9	.10	1.53	.02
5	.06	.....	.....	.....	.....	.58	.01	5	.06	.....	.....	.....	.....	.58	.01
1	.01	1	.01	.....	.....	.22	.00	1	.01	1	.01	.....	.....	.22	00
335	3.88	226	2.58	43	.49	161.78	1.87	347	3.82	226	2.58	44	.48	172.12	1.90
295	3.41	207	2.36	30	.34	150.55	1.74	306	3.37	207	2.36	30	.32	160.55	1.77
8	.09	2	.02	6	.07	.92	.01	9	.10	2	.02	7	.08	1.07	.01
32	.37	17	.19	7	.08	10.33	.12	32	.35	17	.19	7	.08	10.50	.12
8,083	93.49	92	1.05	5	.06	377.01	4.36	8,10	89.29	92	1.05	5	.05	377.76	4.16
1,903	22.01	32	.37	5	.06	110.81	1.28	1,914	21.09	32	.37	5	.05	111.15	1 22
1,545	17.87	1	.01	.....	.....	61.41	.71	1,545	17.02	1	.01	.....	.....	61.41	.68
4,635	53.61	59	.67	.....	.....	204.81	2.37	4,644	51.17	59	.67	.....	.....	205.19	2.26
17	.20	5	.06	6	.07	4.50	.05	19	.21	5	.06	7	.08	5.50	.06
128	1.48	3	.03	.....	.....	5.60	.07	133	1.47	3	.03	.....	.....	5.97	.07
568	6.57	17	.19	.....	.....	46.70	.55	591	6.51	17	.19	.....	.....	48.38	.53
450	5.20	4	.05	.....	.....	30.33	.37	466	5.07	4	.05	.....	.....	31.18	.34
118	1.36	12	.15	.....	.....	16.40	.19	131	1.44	13	.15	.....	.....	17.20	.19
15	.17	8	.09	2	.02	3.00	.03	18	.20	8	.09	2	.02	4.08	.04
12	.14	3	.03	.....	.....	2.33	.03	13	.14	3	.03	.....	.....	2.96	.03
1,219	14.10	18	.21	3	.03	18.7	.22	1,229	13.54	18	.21	3	.03	19.06	.21
3	.03	.....	.....	.....	.....	.59	.01	3	.03	.....	.....	.....	.....	.59	.01
58	.67	8	.09	.....	.....	2.23	.03	59	.65	8	.09	.....	.....	2.31	.03
2	.02	.....	.....	1	.01	.05	.00	2	.02	.....	.....	1	.01	.05	.00
4	.05	2	.02	2	.02	.43	.00	7	.06	2	.02	2	.02	.44	.00
35	.40	3	.02	11	.13	6.24	.07	37	.39	3	.03	11	.12	6.24	.07
2	.02	3	.02	.....	.....	.90	.01	3	.03	3	.03	.....	.....	1.28	.01
8	.09	11	.13	.....	.....	3.69	.04	8	.09	11	.13	.....	.....	3.69	.04
4	.05	.....	.....	2	.02	.05	.00	5	.06	.....	.....	2	.02	.09	.00
22	.25	.....	.....	.....	.....	1.30	.02	22	.25	.....	.....	.....	.....	1.44	.02
280	3.24	211	2.41	1	.01	64.64	.75	289	3.18	211	2.41	2	.02	67.05	.74
120	1.39	50	.57	.....	.....	12.02	.14	124	1.37	50	.57	.....	.....	12.27	.14
447	5.17	25	.29	.....	.....	25.81	.30	489	5.39	25	.29	.....	.....	28.66	.32
373	4.31	.....	.....	.....	.....	6.78	.08	386	4.25	.....	.....	.....	.....	7.14	.08
17	.20	7	.08	.....	.....	2.19	.03	17	.19	7	.08	.....	.....	2.19	.02
4	.05	1	.01	1	.01	.99	.01	4	.04	1	.01	1	.01	.99	.01
6	.07	.....	.....	1	.01	.42	.00	7	.08	.....	.....	1	.01	.59	.01
104	1.20	35	.40	15	.17	13.74	.16	111	1.22	35	.40	17	.18	15.24	.17
14	.16	.....	.....	.....	.....	.36	.00	15	.17	.....	.....	1	.01	.52	.01

TABLE 68½.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with cluding American, Porto Rican, and Philippine*

Serial Nos.	International classification.	Causes of admission to sick report.	Officers, Army. Main strength ..... S. G. O., 4296—A. G. O., 4787. Admissions. Number.	Admissions. Ratio.	Retirement for disability. Number.	Retirement for disability. Ratio.	Deaths. Number.	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc	3	0.70	1	0.21	1	0.21	0.20	0.05
178–179	82	Embolism and thrombosis	.....	.....	1	.21	1	.21	.....	.....
181	83b	Hemorrhoids	20	4.66	.....	.....	.....	.....	.45	.11
183	83d	Varicose veins	2	.47	.....	.....	.....	.....	.14	.03
184	83e	Varicocele	3	.70	.....	.....	.....	.....	.10	.02
185–187	84	Diseases of the lymphatic system.	9	2.09	.....	.....	.....	.....	.23	.05
193–199	86	Diseases of the nasal fossæ	91	21.18	.....	.....	.....	.....	1.40	.33
200–202	87	Diseases of the larynx	29	6.75	.....	.....	.....	.....	.29	.07
203–204	88	Diseases of the thyroid body	3	.70	2	.42	.....	.....	.72	.17
205–206	89–90	Bronchitis	131	30.49	.....	.....	.....	.....	1.93	.45
207	91	Bronchopneumonia	1	.23	.....	.....	.....	.....	.03	.01
208	92	Pneumonia	4	.93	.....	.....	.....	.....	.57	.13
209–215	93	Pleurisy	6	1.40	.....	.....	1	.21	.35	.08
216–217	94	Pulmonary congestion and pulmonary apoplexy	1	.23	.....	.....	.....	.....	.00	.00
219	96	Asthma	12	2.79	1	.21	.....	.....	.74	.17
220	97	Pulmonary emphysema	1	.23	.....	.....	.....	.....	.02	.00
221	98a	Hæmoptysis	1	.23	.....	.....	.....	.....	.30	.07
222	98b	Hay fever	2	.47	.....	.....	.....	.....	.03	.01
224–227	99a	Diseases of the teeth and gums	42	9.78	.....	.....	.....	.....	1.08	.25
228–231	99b	Other diseases of the mouth and annexa	3	.70	.....	.....	.....	.....	.10	.02
232–236	100	Diseases of the pharynx	131	30.49	.....	.....	.....	.....	2.04	.47
238	102	Ulcer of stomach	1	.23	.....	.....	.....	.....	.12	.03
239–244	103	Other diseases of stomach (cancer excepted)	72	16.76	1	.21	.....	.....	1.19	.28
245–253	105	Diarrhea and enteritis	183	42.60	.....	.....	.....	.....	3.06	.71
254	106	Ankylostomiasis	1	.23	.....	.....	.....	.....	.08	.02
255–259	107	Intestinal parasites	3	.70	.....	.....	.....	.....	.03	.01
260	108	Appendicitis	61	14.20	.....	.....	1	.21	5.67	1.32
261–263	109	Hernia	21	4.89	.....	.....	.....	.....	2.90	.68
264–267	110a	Diseases of the anus and fecal fistula	2	.47	.....	.....	.....	.....	.24	.05
268–272	110b	Other diseases of the intestines	45	10.48	2	.42	.....	.....	2.01	.47
275	113	Cirrhosis of liver	2	.47	.....	.....	.....	.....	.11	.02
276	114	Biliary calculi	3	.70	1	.21	.....	.....	.08	.02
277–281	115	Other diseases of liver and gall bladder	14	3.26	.....	.....	.....	.....	1.46	.34
283–284	117	Simple peritonitis	.....	.....	1	.21	.....	.....	.....	.....
288	119	Acute nephritis	.....	.....	.....	.....	.....	.....	.14	.03
289–291	120	Bright's disease	16	3.72	6	1.25	2	.42	2.44	.57
293–299	122	Other diseases of the kidney and annexa	4	.93	.....	.....	.....	.....	.30	.07
303–306	124	Diseases of the bladder	4	.93	.....	.....	.....	.....	.25	.06
301	124b	Enuresis	.....	.....	.....	.....	.....	.....	.....	.....
307–309	125	Diseases of the urethra, urinary abscess, etc	.....	.....	.....	.....	.....	.....	.....	.....
310–312	126	Diseases of the prostate	3	.70	.....	.....	.....	.....	.19	.04
313–319	127	Diseases of the male genital organs (nonvenereal)	3	.70	.....	.....	.....	.....	.17	.04
322–323	143	Furuncle and carbuncle	41	9.54	.....	.....	.....	.....	.81	.19
324–325	144	Acute abscess and cellulitis	38	8.85	.....	.....	.....	.....	.88	.20
352–357	146	Diseases of the bones	19	4.42	.....	.....	.....	.....	1.84	.43
358–360	147	Diseases of the joints	18	4.19	.....	.....	.....	.....	1.08	.25
367	149g	Flat foot	5	1.16	1	.21	.....	.....	.12	.03
372	150	Congenital malformations	6	1.40	.....	.....	.....	.....	.09	.02
373–374	154	Senility	.....	.....	.....	.....	.....	.....	.....	.....
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	8	1.86	.....	.....	.....	.....	.11	.03
379	189Ba	Under observation, undiagnosed, and unknown	7	1.63	.....	.....	.....	.....	.22	.05
380	189Bb	Malingering	.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	For diseases not mentioned above.	253	58.89	3	.63	1	.21	13.89	3.23

-atios per 1,000 of mean strength, for the Army; separately for officers, total enlisted (in- troops), and grand total, year 1913—Continued.

Total enlisted men (American, Porto Rican, and Scouts).								Grand total, the Army.							
S. G. O., 86456—A. G. O., 87527.								S. G. O., 90752—A. G. O., 92314.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Dis- charges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
12	0.14	5	0.06	5	0.06	2.73	0.03	15	0.17	5	0.06	6	0.06	2.94	0.03
6	.07	2	.02	2	.02	.81	.01	6	.07	2	.02	3	.03	.81	.01
466	5.39	.....	.....	.....	.....	13.96	.16	486	5.36	.....	.....	.....	.....	14.42	.16
61	.71	1	.01	.....	.....	4.43	.05	63	.69	1	.01	.....	.....	4.57	.05
209	2.42	1	.01	.....	.....	10.83	.13	212	2.34	1	.01	.....	.....	10.93	.12
482	5.58	.....	.....	.....	.....	25.67	.30	491	5.41	.....	.....	.....	.....	25.90	.29
836	9.67	.....	.....	.....	.....	10.48	.12	927	10.21	.....	.....	.....	.....	11.88	.13
197	2.28	.....	.....	.....	.....	3.34	.04	226	2.49	.....	.....	.....	.....	3.63	.04
14	.16	2	.02	.....	.....	1.20	.01	17	.19	2	.62	.....	.....	1.93	.02
2,654	30.70	7	.08	.....	.....	55.20	.64	2,785	30.69	7	.08	.....	.....	57.13	.63
28	.32	.....	.....	3	.03	2.40	.03	29	.32	.....	.....	3	.03	2.44	.03
191	2.21	3	.03	25	.29	15.74	.18	195	2.15	3	.03	25	.27	16.31	.18
220	2.54	7	.08	4	.05	13.72	.16	226	2.49	7	.08	5	.05	14.07	.16
41	.47	.....	.....	.....	.....	.58	.01	42	.46	.....	.....	.....	.....	.58	.01
83	.96	4	.05	.....	.....	4.81	.06	95	1.05	4	.05	.....	.....	5.54	.06
1	.01	.....	.....	.....	.....	.02	.00	2	.02	.....	.....	.....	.....	.04	.00
8	.09	.....	.....	.....	.....	.26	.00	9	.10	.....	.....	.....	.....	.56	.01
.....	.....	.....	.....	.....	.....	.01	.00	2	.02	.....	.....	.....	.....	.04	.00
409	4.73	1	.01	.....	.....	7.09	.08	451	4.97	1	.01	.....	.....	8.17	.09
74	.86	.....	.....	.....	.....	2.13	.02	77	.85	.....	.....	.....	.....	2.23	.02
3,981	46.05	1	.01	.....	.....	56.70	.66	4,112	45.31	1	.01	.....	.....	58.73	.65
15	.17	1	.01	.....	.....	2.85	.03	16	.18	1	.01	.....	.....	2.97	.03
1,031	11.93	1	.01	.....	.....	19.79	.23	1,103	12.15	1	.01	.....	.....	20.98	.23
2,729	31.57	2	.02	4	.05	34.21	.40	2,912	32.09	2	.02	4	.04	37.27	.41
129	1.49	.....	.....	1	.01	2.84	.03	130	1.43	.....	.....	1	.01	2.93	.03
127	1.47	.....	.....	.....	.....	2.47	.03	130	1.43	.....	.....	.....	.....	2.50	.03
583	6.74	5	.06	10	.11	42.33	.49	644	7.10	5	.06	11	.12	47.99	.53
297	3.44	13	.15	5	.06	33.34	.39	318	3.50	13	.15	5	.05	36.24	.40
82	.95	1	.01	.....	.....	5.28	.06	84	.93	1	.01	.....	.....	5.52	.06
2,034	23.53	4	.05	.....	.....	27.07	.31	2,079	22.91	4	.05	.....	.....	29.08	.32
3	.03	.....	.....	1	.01	.37	.00	5	.06	.....	.....	1	.01	.38	.01
17	.20	1	.01	.....	.....	1.14	.01	20	.22	1	.01	.....	.....	1.22	.01
318	3.68	2	.02	4	.05	15.72	.18	332	3.66	2	.02	4	.04	17.19	.19
7	.08	.....	.....	3	.03	.94	.01	7	.08	.....	.....	3	.03	.94	.01
22	.25	.....	.....	6	.07	1.15	.01	22	.24	.....	.....	6	.06	1.29	.01
53	.61	18	.21	11	.13	8.82	.10	69	.76	18	.21	13	.14	11.25	.12
18	.21	2	.02	.....	.....	2.48	.03	22	.24	2	.02	.....	.....	2.78	.03
167	1.93	21	.24	.....	.....	9.86	.11	171	1.88	21	.24	.....	.....	10.10	.11
85	.98	21	.24	.....	.....	6.45	.07	85	.94	21	.24	.....	.....	6.45	.07
69	.80	.....	.....	.....	.....	1.66	.02	69	.76	.....	.....	.....	.....	1.66	.02
11	.13	.....	.....	.....	.....	.86	.01	14	.15	.....	.....	.....	.....	1.05	.01
409	4.73	.....	.....	.....	.....	12.49	.14	412	4.54	.....	.....	.....	.....	12.66	.14
1,473	17.04	.....	.....	.....	.....	25.99	.30	1,514	16.68	.....	.....	.....	.....	26.81	.30
990	11.45	2	.02	.....	.....	28.30	.33	1,028	11.33	2	.02	.....	.....	29.18	.32
152	1.76	3	.03	1	.01	9.38	.11	171	1.88	3	.03	1	.01	11.22	.12
299	3.46	16	.18	.....	.....	20.74	.24	317	3.49	16	.18	.....	.....	21.81	.24
161	1.86	67	.77	.....	.....	13.66	.16	166	1.83	67	.77	.....	.....	13.78	.15
311	3.60	.....	.....	.....	.....	8.66	.10	317	3.49	.....	.....	.....	.....	8.75	.10
.....	.....	1	.01	.....	.....	.....	.....	.....	.....	1	.01	.....	.....	.....	.....
264	3.05	.....	.....	.....	.....	4.40	.05	272	3.00	.....	.....	.....	.....	4.50	.05
106	1.23	3	.03	5	.06	6.98	.08	113	1.25	3	.03	5	.05	7.20	.08
34	.39	.....	.....	.....	.....	1.81	.02	34	.37	.....	.....	.....	.....	1.81	.02
5,531	63.97	91	1.04	8	.09	172.65	2.00	5,784	63.73	91	1.04	9	.10	186.55	2.06

TABLE 68½.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with cluding American, Porto Rican, and Philippin*

Serial Nos.	International classification.	Causes of admission to sick report.	Officers, Army. Main strength ..... S. G. O., 4296—A. G. O., 4787. Admissions. Number.	Admissions. Ratio.	Retirement for disability. Number.	Retirement for disability. Ratio.	Deaths. Number.	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.								
426–434	155–163	Suicides, all					1	0.21		
435	164	Poisoning by food	16	3.72						
436	165a	Venomous bites and stings	3	.70						
437	165b	Other poisoning (deleterious gases excepted)	1	.23						
438	166	Conflagration								
439	167	Burns (conflagrations excepted)	3	.70						
440	168	Absorption of deleterious gases								
442	169	Drowning, accidental					3	.63		
443	170	Traumatism by firearms (other than specified)	4	.93			1	.21		
444	170a	Shot by sentry or guard								
445	171	Traumatism by cutting or piercing instruments	14	3.26						
446	172	Traumatism by fall	162	37.71						
447	173	Traumatism in mines and quarries								
448	174	Traumatism by machines	6	1.40						
449	175	Traumatism by other crushing	17	3.96			6	1.25		
450	176	Injuries by animals	56	13.04						
452	178	Effects of excessive cold								
453	179	Effects of heat	6	1.40						
454	180	Effects of lightning								
455	181	Effects of electricity								
456–458	182–4	Homicides, all								
459	185	Fractures, causes not specified								
460	186	Other external violence	116	27.00						
425	186	Secondary results of injury	15	3.49						
462–466	.....	Killed or wounded in action	4	.93			3	.63		
462	.....	By bullet	3	.70			3	.63		
463	.....	By shell								
464	.....	By sword or bayonet								
465	.....	By bolo, kris, etc								
466	.....	By other weapon	1	.23						
		DISEASES AND INJURIES GROUPED.								
	.....	General diseases	404	94.04	3	0.63	3	0.63	24.44	5.69
	1–19	Epidemic diseases	321	74.72	1	.21			7.64	1.78
	20–59	Other general diseases	83	19.32	2	.42	3	.63	16.80	3.91
	.....	Diseases of the nervous system and organs of special sense	180	41.90	8	1.67	2	.42	15.15	3.53
	60–74	Of the nervous system	103	23.98	7	1.46	2	.42	12.01	2.80
	75	Of the eye and its annexa	47	10.94					1.37	.32
	76	Of the ear and its annexa	30	6.98	1	.21			1.77	.41
	77–85	Diseases of the circulatory system	50	11.64	9	1.88	5	1.04	3.66	.85
	86–98	Diseases of the respiratory system	283	65.88	3	.63	1	.21	6.47	1.51
	99–118	Diseases of the digestive system	584	135.94	5	1.04	1	.21	20.15	4.69
	119–127	Diseases of the genito-urinary system	41	9.54	6	1.25	2	.42	4.09	.95
	142–145	Diseases of the skin and cellular tissue	124	28.87					2.94	.69
	146–149	Diseases of the organs of locomotion	106	24.67	2	.42			4.81	1.12
	156	Malformations, etc	6	1.40					.09	.02
	154	Diseases, results of old age								
	189	Ill-defined diseases	21	4.89					.35	.08
		Total for disease	1,799	418.76	36	7.52	14	2.92	82.17	19.13
	155–186	External causes	423	98.46			14	2.92	20.20	4.70
		Total for disease and external causes	2,222	517.23	36	7.52	28	5.85	102.37	23.83

ratios per 1,000 of mean strength, for the Army; separately for officers, total enlisted (in-troops), and grand total, year 1918—Continued.

Total enlisted men (American, Porto Rican, and Scouts).								Grand total, the Army.							
S. G. O., 86456—A. G. O., 87527.								S. G. O., 90752—A. G. O., 92314.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
10	0.12	.....	.....	42	0.48	.....	.....	10	0.11	.....	.....	43	0.47	.....	.....
256	2.96	.....	.....	.....	.....	.....	.....	272	3.00	.....	.....	.....	.....	.....	.....
116	1.34	.....	.....	.....	.....	.....	.....	119	1.31	.....	.....	.....	.....	.....	.....
42	.49	.....	.....	9	.10	.....	.....	43	.47	.....	.....	9	.10	.....	.....
1	.01	.....	.....	.....	.....	.....	.....	1	.01	.....	.....	.....	.....	.....	.....
347	4.01	2	0.02	1	.01	.....	.....	350	3.86	2	0.02	1	.01	.....	.....
3	.03	.....	.....	1	.01	.....	.....	3	.03	.....	.....	1	.01	.....	.....
.....	.....	.....	.....	29	.33	.....	.....	.....	.....	.....	.....	32	.35	.....	.....
189	2.19	22	.25	11	.13	.....	.....	193	2.13	22	.25	12	.13	.....	.....
7	.08	.....	.....	2	.02	.....	.....	7	.08	.....	.....	2	.02	.....	.....
1,011	11.69	6	.07	1	.01	.....	.....	1,025	11.29	6	.07	1	.01	.....	.....
3,411	39.45	34	.39	16	.18	.....	.....	3,573	39.37	34	.39	16	.17	.....	.....
1	.01	.....	.....	.....	.....	.....	.....	1	.01	.....	.....	.....	.....	.....	.....
99	1.15	4	.05	.....	.....	.....	.....	105	1.16	4	.05	.....	.....	.....	.....
604	6.99	3	.03	42	.48	.....	.....	621	6.84	3	.03	48	.52	.....	.....
1,018	11.77	9	.10	2	.02	.....	.....	1,074	11.83	9	.10	2	.02	.....	.....
28	.32	3	.03	1	.01	.....	.....	28	.31	3	.03	1	.01	.....	.....
151	1.75	.....	.....	2	.02	.....	.....	157	1.73	.....	.....	2	.02	.....	.....
2	.02	.....	.....	3	.03	.....	.....	2	.02	.....	.....	3	.03	.....	.....
2	.02	.....	.....	1	.01	.....	.....	2	.02	.....	.....	1	.01	.....	.....
6	.07	.....	.....	16	.18	.....	.....	6	.07	.....	.....	16	.17	.....	.....
2	.02	.....	.....	.....	.....	.....	.....	2	.02	.....	.....	.....	.....	.....	.....
4,043	46.76	16	.18	4	.05	.....	.....	4,159	45.83	16	.18	4	.04	.....	.....
137	1.58	8	.09	.....	.....	.....	.....	152	1.67	8	.09	.....	.....	.....	.....
79	.91	4	.05	35	.40	.....	.....	83	.91	4	.05	38	.41	.....	.....
51	.59	3	.03	32	.37	.....	.....	54	.60	3	.03	35	.38	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
1	.01	.....	.....	.....	.....	.....	.....	1	.01	.....	.....	.....	.....	.....	.....
9	.10	1	.01	3	.03	.....	.....	9	.10	1	.01	3	.03	.....	.....
18	.21	.....	.....	.....	.....	.....	.....	19	.21	.....	.....	.....	.....	.....	.....
18,338	212.11	394	4.50	95	1.09	826.88	9.56	18,742	206.52	394	4.50	98	1.06	851.33	9.38
7,845	90.74	5	.06	27	.31	197.14	2.28	8,166	89.98	5	.06	27	.29	204.78	2.26
10,493	121.37	389	4.44	68	.78	629.75	7.28	10,576	116.54	389	4.44	71	.77	646.55	7.12
2,407	27.84	373	4.26	19	.22	178.80	2.07	2,587	28.51	373	4.26	21	.23	193.94	2.14
1,183	13.68	338	3.86	17	.19	134.20	1.55	1,286	14.17	338	3.86	19	.21	146.21	1.61
761	8.80	23	.26	.....	.....	27.37	.32	808	8.90	23	.26	.....	.....	28.74	.32
463	5.36	12	.14	2	.02	17.23	.20	493	5.43	12	.14	2	.02	19.00	.21
1,465	16.95	48	.55	24	.27	79.23	.92	1,515	16.69	48	.55	29	.31	82.89	.91
4,290	49.62	24	.27	32	.37	108.90	1.26	4,573	50.39	24	.27	33	.36	115.37	1.27
1,847	137.03	32	.37	32	.37	255.15	2.95	12,431	136.98	32	.37	33	.36	275.30	3.03
788	9.12	41	.47	17	.19	38.85	.45	829	9.13	41	.47	19	.21	42.94	.47
4,774	55.22	9	.10	1	.01	113.68	1.31	4,898	53.97	9	.10	1	.01	116.63	1.29
1,956	22.62	98	1.12	1	.01	81.30	.94	2,062	22.72	98	1.12	1	.01	86.11	.95
311	3.60	1	.01	.....	.....	8.66	.10	317	3.49	1	.01	.....	.....	8.75	.10
.....	.....	1	.01	.....	.....	.....	.....	.....	.....	1	.01	.....	.....	.....	.....
472	5.46	3	.03	5	.06	13.82	.16	493	5.43	3	.03	5	.05	14.17	.16
46,648	539.56	1,024	11.70	226	2.58	1,705.27	19.72	48,447	533.84	1,024	11.70	240	2.60	1,787.44	19.70
11,566	133.78	111	1.27	221	2.53	367.41	4.25	11,989	132.11	111	1.27	235	2.55	387.61	4.27
58,214	673.34	1,135	12.97	447	5.11	2,072.68	23.97	60,436	665.95	1,135	12.97	475	5.15	2,175.05	23.97

TABLE No. 69.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with enlisted men, fo*

Serial Nos.	International classification.	Causes of admission to sick report.	Officers, Army.							
		Mean strength	S. G. O., 4296—A. G. O., 4787.							
			Admissions.		Retirement for disability.		Deaths.		Noneffective.	
			Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
1	1	Typhoid fever							0.06	0.01
2	1a	Paratyphoid fever								
5	2	Typhus fever								
7–11	4	Malaria	59	13.73	1	0.21			1.66	.39
7		Estivo-autumnal fever	18	4.19					.51	.12
8		Malarial cachexia	1	.23	1	.21			.00	.00
9		Quartan malarial fever								
10		Tertian malarial fever	34	7.91					.93	.22
11		Undetermined malarial fever	6	1.40					.22	.05
12	5	Smallpox and varioloid								
13	5b	Vaccinia								
14	6	Measles	2	.47					.12	.03
15	7	Scarlet fever								
17	9	Diphtheria	2	.47					.10	.02
18	10	Influenza	182	42.37					3.00	.70
19	12	Asiatic cholera								
21–23	14	Dysentery	16	3.72					1.55	.36
21		Bacillary	1	.23					.02	.00
22		Entamebic	13	3.03					1.41	.33
23		Unclassified	2	.47					.12	.03
27	18	Erysipelas	2	.47					.02	.00
29	19b	Dengue	38	8.85					.63	.15
31	19d	German measles	2	.47					.06	.01
34	19g	Mumps	8	1.86					.29	.07
37	20	Purulent infection and septicemia	2	.47			1	0.21	.35	.08
42–46	25	Mycoses								
47		Pellagra								
49–57	28–34	Tuberculosis, all	12	2.79	2	.42	1	.21	10.34	2.41
49–51	28	Tuberculosis of lungs	11	2.56	2	.42			10.03	2.33
52	29	Miliary tuberculosis, acute	1	.23			1	.21	.15	.04
53–57	30–34	Tuberculosis of other organs							.16	.04
59–74	37–38	Venereal diseases, all	20	4.66					.73	.17
59–64	37	Syphilis	11	2.56					.34	.08
65–67	38a	Soft chancre								
68–74	38b	Gonococcus infection	9	2.09					.39	.09
75–79	39–45	Cancer and other malignant tumors	2	.47			1	.21	.93	.22
80	46	Benign tumors	5	1.16					.31	.07
81–85	47–48	Rheumatism, articular, all	23	5.35					1.63	.38
81–82	47	Acute articular rheumatism	10	2.33					.84	.20
83–85	48	Chronic articular rheumatism	13	3.03					.79	.18
87–88	50	Diabetes	3	.70					1.06	.25
89	51	Exophthalmic goitre	1	.23					.63	.15
97–100	56	Alcoholism and results	10	2.33					.28	.07
101–102	57–58	Chronic occupational poisoning								
103–104	59	Other chronic poisoning, including drug habit	1	.23					.08	.02
105–106	60	Encephalitis								
107	61	Simple meningitis	1	.23					.01	.00
108	61a	Epidemic cerebrospinal meningitis								
109	62	Locomotor ataxia	1	.23	2	.42			.32	.07
110–115	63	Other diseases of spinal cord								
116	64	Cerebral hemorrhage, apoplexy	1	.23					.04	.01
117–119	66	Paralysis without specified cause	1	.23					.09	.02
120–126	67–68	Mental alienation	9	2.09	5	1.04	1	.21	2.42	.56
127	69	Epilepsy	4	.93					.25	.06
129–133	73	Neuralgia and neuritis	42	9.78					2.85	.66
138–141	75a	Conjunctivitis	13	3.03					.35	.08
142	75b	Trachoma								
166	77	Pericarditis								
167	78	Acute endocarditis	1	.23					.17	.04
169–174	79	Organic heart disease	7	1.63	6	1.25	2	.42	1.49	.35
175	80	Angina pectoris	1	.23			1	.21	.16	.04
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc	3	.70	1	.21	1	.21	.20	.05

ratios per 1,000 of mean strength, for the Army, officers and total American troops, the year 1913.

American troops, Army.								Officers and American troops, Army.							
S. G. O., 80766—A. G. O., 81697.								S. G. O., 85062—A. G. O., 86484.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
4	0.05					0.65	0.01	4	0.05					0.72	0.01
5	.06					.70	.01	5	.06					.70	.01
3	.04					.52	.01	3	.04					.52	.01
1,999	24.75	1	0.01	2	0.02	42.76	.53	2,058	24.19	1	0.01	2	0.02	44.41	.52
412	5.10			2	.02	12.81	.16	430	5.06			2	.02	13.32	.16
16	.20	1	.01			2.05	.03	17	.20	1	.01			2.05	.02
24	.30					.44	.01	24	.28					.44	.01
1,411	17.47					25.18	.31	1,445	16.99					26.10	.31
136	1.68					2.28	.03	142	1.67					2.51	.03
8	.10			2	.02	.57	.01	8	.09			2	.02	.57	.01
704	8.72					9.18	.11	704	8.28					9.18	.11
520	6.44	1	.01	11	.13	28.76	.36	522	6.14	1	.01	11	.13	28.88	.34
4	.05					.56	.01	4	.05					.56	.01
23	.28					1.21	.02	25	.29					1.31	.02
1,221	15.12					17.83	.22	1,403	16.49					20.83	.25
1	.01			1	.01	.01	.00	1	.01			1	.01	.01	.00
309	3.83	3	.04	7	.09	20.64	.26	325	3.82	3	.04	7	.08	22.19	.26
16	.20					1.25	.02	17	.20					1.27	.01
239	2.96	3	.04	7	.09	17.73	.22	252	2.96	3	.04	7	.08	19.14	.23
54	.67					1.66	.02	56	.66					1.78	.02
41	.51					2.41	.03	43	.51					2.43	.03
452	5.60					6.51	.08	490	5.76					7.13	.08
197	2.44					5.10	.06	199	2.34					5.16	.06
634	7.85					29.93	.37	642	7.55					30.22	.36
9	.11	1	.01	5	.06	1.10	.01	11	.13	1	.01	6	.07	1.45	.02
5	.06					.58	.01	5	.06					.58	.01
1	.01	1	.01			.22	.00	1	.01	1	.01			.22	.00
296	3.66	185	2.26	40	.49	156.66	1.94	308	3.62	185	2.26	41	.47	166.99	1.96
260	3.22	168	2.06	28	.34	145.85	1.81	271	3.19	168	2.06	28	.32	155.88	1.83
5	.06			5	.06	.50	.01	6	.07			6	.07	.65	.01
31	.38	17	.21	7	.09	10.30	.13	31	.36	17	.21	7	.08	10.46	.12
7,852	97.22	92	1.13	5	.06	364.34	4.51	7,872	92.54	92	1.13	5	.06	365.07	4.29
1,875	23.22	32	.39	5	.06	108.49	1.34	1,886	22.17	32	.39	5	.06	108.83	1.28
1,510	18.70	1	.01			59.37	.74	1,510	17.75	1	.01			59.37	.70
4,467	55.31	59	.72			196.48	2.43	4,476	52.62	59	.72			196.87	2.31
16	.20	5	.06	6	.07	4.35	.05	18	.21	5	.06	7	.08	5.28	.06
112	1.39	3	.04			5.16	.06	117	1.38	3	.04			5.47	.06
547	6.77	17	.21			45.44	.56	570	6.70	17	.21			47.07	.55
430	5.32	4	.05			29.19	.36	440	5.17	4	.05			30.03	.35
117	1.45	13	.16			16.24	.20	130	1.53	13	.16			17.04	.20
15	.19	8	.10	2	.02	3.02	.04	18	.21	8	.10	2	.02	4.08	.05
11	.14	3	.04			2.29	.03	12	.14	3	.04			2.92	.03
1,216	15.06	18	.22	3	.04	18.71	.23	1,226	14.41	18	.22	3	.03	19.00	.22
3	.04					.59	.01	3	.04					.59	.01
58	.72	8	.10			2.22	.03	59	.69	8	.10			2.31	.03
2	.02			1	.01	.05	.00	2	.02			1	.01	.05	.00
4	.05	2	.02	2	.02	.43	.01	5	.06	2	.02	2	.02	.44	.01
35	.43	3	.04	11	.13	6.24	.08	35	.41	3	.04	11	.13	6.24	.07
2	.02	3	.04			.96	.01	3	.04	3	.04			1.28	.02
8	.10	10	.12			3.64	.05	8	.09	10	.12			3.64	.04
4	.05			2	.02	.05	.00	5	.06			2	.02	.09	.00
22	.27					1.36	.02	23	.27					1.44	.02
278	3.44	210	2.57			64.39	.80	287	3.37	210	2.57	1	.01	66.80	.79
116	1.44	50	.61			11.96	.15	120	1.41	50	.61			12.21	.14
422	5.22	25	.31			24.96	.31	464	5.45	25	.31			27.81	.33
294	3.64					5.15	.06	307	3.61					5.50	.06
17	.21	7	.01			2.19	.03	17	.20	7	.09			2.19	.03
4	.05	1	.01	1	.01	.99	.01	4	.05	1	.01	1	.01	.99	.01
6	.07			1	.01	.92	.01	7	.08			1	.01	.59	.01
104	1.29	34	.42	15	.18	13.58	.17	111	1.30	34	.42	17	.20	15.07	.18
14	.17					.36	.00	15	.18			1	.01	.52	.01
12	.15	5	.06	5	.06	2.73	.03	15	.18	5	.06	6	.07	2.94	.03

TABLE No. 69.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with enlisted men, for the*

Serial Nos.	International classification.	Mean strength.....	Officers, Army. S. G. O., 4296—A. G. O., 4787.							
		Causes of admission to sick report.	Admissions.		Retirement for disability.		Deaths.		Noneffective.	
			Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
178–179	82	Embolism and thrombosis.....			1	0.21	1	0.21		
181	83b	Hemorrhoids.....	20	4.66					0.45	0.11
183	83d	Varicose veins.....	2	.47					.14	.03
184	83e	Varicocele.....	3	.70					.10	.02
185–187	84	Diseases of the lymphatic system..	9	2.09					.23	.05
193–199	86	Diseases of the nasal fossæ.....	91	21.18					1.40	.33
200–202	87	Diseases of the larynx.....	29	6.75					.29	.07
203–204	88	Diseases of the thyroid body.....	3	.70	2	.42			.72	.17
205–206	89–90	Bronchitis.....	131	30.49					1.93	.45
207	91	Bronchopneumonia.....	1	.23					.03	.01
208	92	Pneumonia.....	4	.93					.57	.13
209–215	93	Pleurisy.....	6	1.40			1	.21	.35	.08
216–217	94	Pulmonary congestion and pulmonary apoplexy.....	1	.23					.00	.00
219	96	Asthma.....	12	2.79	1	.21			.74	.17
220	97	Pulmonary emphysema.....	1	.23					.02	.00
221	98a	Hæmoptysis.....	1	.23					.30	.07
222	98b	Hay fever.....	2	.47					.03	.01
224–227	99a	Diseases of the teeth and gums....	42	9.78					1.08	.25
228–231	99b	Other diseases of the mouth and annexa.....	3	.70					.10	.02
232–236	100	Diseases of the pharynx.....	131	30.49					2.04	.47
238	102	Ulcer of stomach.....	1	.23					.12	.03
239–244	103	Other diseases of stomach (cancer excepted).....	72	16.76	1	.21			1.19	.28
245–253	105	Diarrhea and enteritis.....	183	42.60					3.06	.71
254	106	Ankylostomiasis.....	1	.23					.08	.02
255–259	107	Intestinal parasites.....	3	.70					.03	.01
260	108	Appendicitis.....	61	14.20			1	.21	5.67	1.32
261–263	109	Hernia.....	21	4.89					2.90	.68
264–267	110a	Diseases of the anus and fæcal fistulæ.....	2	.47					.24	.05
268–272	110b	Other diseases of the intestines...	45	10.48	2	.42			2.01	.47
275	113	Cirrhosis of liver.....	2	.47					.11	.02
276	114	Biliary calculi.....	3	.70	1	.21			.08	.02
277–281	115	Other diseases of liver and gall bladder.....	14	3.26					1.46	.34
283–284	117	Simple peritonitis.....			1	.21				
288	119	Acute nephritis.....							.14	.03
289–291	120	Bright's disease.....	16	3.72	6	1.25	2	.42	2.44	.57
293–299	122	Other diseases of the kidney and annexa.....	4	.93					.30	.07
303–306	124	Diseases of the bladder.....	4	.93					.25	.06
304	124b	Enuresis.....								
307–309	125	Diseases of the urethra, urinary abscess, etc.....								
310–312	126	Diseases of the prostate.....	3	.70					.19	.04
313–319	127	Diseases of the male genital organs (nonvenereal).....	3	.70					.17	.04
322–323	143	Furuncle and carbuncle.....	41	9.54					.81	.19
324–325	144	Acute abscess and cellulitis.....	38	8.85					.88	.20
352–357	146	Diseases of the bones.....	19	4.42					1.84	.43
358–360	147	Diseases of the joints.....	18	4.19					1.08	.25
367	149g	Flat foot.....	5	1.16	1	.21			.12	.03
372	150	Congenital malformations.....	6	1.40					.09	.02
373–374	154	Senility.....								
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation.....	8	1.86					.11	.03
379	189Ba	Under observation, undiagnosed and unknown.....	7	1.63					.22	.05
380	189Bb	Malingering.....								
		For diseases not mentioned above.	253	58.89	3	.63	1	.21	13.89	3.23

atios per 1,000 of mean strength, for the Army, officers and total American troops, ear 1913—Continued.

American troops, Army.								Officers and American troops, Army.							
S. G. O., 80766—A. G. O., 81697.								S. G. O., 85062—A. G. O., 86484.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
5	0.06	2	0.02	2	0.02	0.77	0.01	5	0.06	2	0.02	3	0.03	0.77	0.01
457	5.66	.....	.....	.....	.....	13.72	.17	477	5.61	.....	.....	.....	.....	14.17	.17
61	.76	1	.01	.....	.....	4.43	.05	63	.74	1	.01	.....	.....	4.57	.05
209	2.59	1	.01	.....	.....	10.83	.13	212	2.49	1	.01	.....	.....	10.93	.13
445	5.51	.....	.....	.....	.....	24.00	.30	454	5.34	.....	.....	.....	.....	24.23	.29
779	9.65	.....	.....	.....	.....	9.69	.12	870	10.23	.....	.....	.....	.....	11.09	.13
190	2.35	.....	.....	.....	.....	3.12	.04	219	2.57	.....	.....	.....	.....	3.41	.04
13	.16	2	.02	.....	.....	1.18	.01	16	.19	2	.02	.....	.....	1.91	.02
2,457	30.42	6	.07	.....	.....	49.92	.62	2,588	30.42	6	.07	.....	.....	51.84	.61
23	.28	.....	.....	3	.04	2.13	.03	24	.28	.....	.....	3	.03	2.16	.03
179	2.22	3	.04	23	.28	15.02	.19	183	2.15	3	.04	23	.27	16.58	.20
212	2.62	7	.09	4	.05	12.68	.16	218	2.56	7	.09	5	.06	13.02	.15
41	.51	.....	.....	.....	.....	.58	.01	42	.49	.....	.....	.....	.....	.58	.01
77	.95	4	.05	.....	.....	4.62	.06	89	1.05	4	.05	.....	.....	5.36	.06
1	.01	.....	.....	.....	.....	.02	.00	2	.02	.....	.....	.....	.....	.04	.00
7	.09	.....	.....	.....	.....	.25	.00	8	.09	.....	.....	.....	.....	.55	.01
.....	.....	.....	.....	.....	.....	.01	.00	2	.02	.....	.....	.....	.....	.04	.00
366	4.53	1	.01	.....	.....	6.19	.08	408	4.80	1	.01	.....	.....	7.27	.09
67	.83	.....	.....	.....	.....	1.91	.02	70	.82	.....	.....	.....	.....	2.02	.02
3,919	48.52	1	.01	.....	.....	55.72	.69	4,050	47.61	1	.01	.....	.....	57.76	.68
15	.19	1	.01	.....	.....	2.85	.04	16	.19	1	.01	.....	.....	2.97	.03
997	12.34	1	.01	.....	.....	19.51	.24	1,069	12.57	1	.01	.....	.....	20.70	.24
2,578	31.92	2	.02	4	.05	32.48	.40	2,761	32.46	2	.02	4	.05	35.54	.42
93	1.15	.....	.....	1	.01	2.23	.03	94	1.11	.....	.....	1	.01	2.31	.03
100	1.24	.....	.....	.....	.....	2.02	.02	103	1.21	.....	.....	.....	.....	2.05	.02
580	7.18	4	.05	9	.11	42.06	.52	641	7.54	4	.05	10	.12	47.73	.56
291	3.60	13	.16	5	.06	32.70	.40	312	3.67	13	.16	5	.06	35.59	.42
79	.98	1	.01	.....	.....	5.11	.06	81	.95	1	.01	.....	.....	5.35	.06
1,751	21.68	4	.05	.....	.....	23.81	.29	1,796	21.11	4	.05	.....	.....	25.82	.30
3	.04	.....	.....	1	.01	.37	.00	5	.06	.....	.....	1	.01	.48	.01
16	.20	1	.01	.....	.....	1.10	.01	19	.22	1	.01	.....	.....	1.18	.01
304	3.76	2	.02	4	.05	15.26	.19	318	3.74	2	.02	4	.05	16.72	.20
6	.07	.....	.....	2	.02	.92	.01	6	.07	.....	.....	2	.02	.92	.01
21	.26	.....	.....	6	.07	1.13	.01	21	.25	.....	.....	6	.07	1.27	.01
52	.64	17	.21	11	.13	8.66	.11	68	.80	17	.21	13	.15	11.10	.13
18	.22	2	.02	.....	.....	2.48	.03	22	.26	2	.02	.....	.....	2.78	.03
163	2.02	21	.26	.....	.....	9.77	.12	167	1.96	21	.26	.....	.....	10.02	.12
85	1.05	21	.26	.....	.....	6.45	.08	85	1.00	21	.26	.....	.....	6.45	.08
67	.83	.....	.....	.....	.....	1.64	.02	67	.79	.....	.....	.....	.....	1.64	.02
10	.12	.....	.....	.....	.....	.85	.01	13	.15	.....	.....	.....	.....	1.04	.01
373	4.62	.....	.....	.....	.....	11.33	.14	376	4.42	.....	.....	.....	.....	11.50	.14
1,349	16.70	.....	.....	.....	.....	23.19	.29	1,390	16.34	.....	.....	.....	.....	24.01	.28
846	10.48	2	.02	.....	.....	24.46	.30	884	10.39	2	.02	.....	.....	25.34	.30
146	1.81	3	.04	1	.01	8.92	.11	165	1.94	3	.04	1	.01	10.75	.13
286	3.54	16	.20	.....	.....	19.95	.25	304	3.57	16	.20	.....	.....	21.03	.25
161	1.99	67	.82	.....	.....	13.66	.17	166	1.95	67	.82	.....	.....	13.78	.16
308	3.81	1	.01	.....	.....	8.60	.11	314	3.69	1	.01	.....	.....	8.69	.10
.....	.....	1	.01	.....	.....	.....	.....	.....	.....	1	.01	.....	.....	.....	.....
231	2.86	.....	.....	.....	.....	3.73	.05	239	2.81	.....	.....	.....	.....	3.84	.05
105	1.30	3	.04	5	.06	6.97	.09	112	1.32	3	.04	5	.06	7.19	.08
32	.40	.....	.....	.....	.....	1.79	.02	32	.38	.....	.....	.....	.....	1.79	.02
5,132	63.54	89	1.09	7	.09	161.18	2.00	5,385	63.31	89	1.09	8	.09	175.07	2.03

TABLE NO. 69.—*Admissions to sick report, discharges, deaths, and noneffectiveness, wit enlisted men, for th*

Serial Nos.	International classification.	Causes of admission to sick report.	Officers, Army. S. G. O., 4296—A. G. O., 4787. Mean strength							
			Admissions.		Retirement for disability.		Deaths.		Noneffective.	
			Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[1]								
426–434	155–163	Suicides, all					1	0.21		
435	164	Poisoning by food	16	3.72						
436	165a	Venomous bites and stings	3	.70						
437	165b	Other poisoning (deleterious gases excepted)	1	.23						
438	166	Conflagration								
439	167	Burns (conflagrations excepted)	3	.70						
440	168	Absorption of deleterious gases								
442	169	Drowning, accidental					3	.63		
443	170	Traumatism by firearms (other than specified)	4	.93			1	.21		
444	170a	Shot by sentry or guard								
445	171	Traumatism by cutting or piercing instruments	14	3.26						
446	172	Traumatism by fall	162	37.71						
447	173	Traumatism in mines and quarries								
448	174	Traumatism by machines	6	1.40						
449	175	Traumatism by other crushing	17	3.96			6	1.25		
450	176	Injuries by animals	56	13.04						
452	178	Effects of excessive cold								
453	179	Effects of heat	6	1.40						
454	180	Effects of lightning								
455	181	Effects of electricity								
456–458	182–4	Homicides, all								
459	185	Fractures, causes not specified								
460	186	Other external violence	116	27.00						
425	186	Secondary results of injury	15	3.49						
462–466	.....	Killed or wounded in action	4	.93			3	.63		
462	.....	By bullet	3	.70			3	.63		
465	.....	By bolo, kris, etc								
466	.....	By other weapon	1	.23						
		DISEASES AND INJURIES GROUPED.								
		General diseases	404	94.04	3	0.63	3	.63	24.44	5.69
	1–19	Epidemic diseases	321	74.72	1	.21			7.64	1.78
	20–59	Other general diseases	83	19.32	2	.42	3	.63	16.80	3.91
		Diseases of the nervous system and organs of special sense	180	41.90	8	1.67	2	.42	15.15	3.53
	60–74	Of the nervous system	103	23.98	7	1.46	2	.42	12.01	2.80
	75	Of the eye and its annexa	47	10.94					1.37	.32
	76	Of the ear and its annexa	30	6.98	1	.21			1.77	.41
	77–85	Diseases of the circulatory system	50	11.64	9	1.88	5	1.04	3.66	.85
	86–98	Diseases of the respiratory system	283	65.88	3	.63	1	.21	6.47	1.51
	99–118	Diseases of the digestive system	584	135.94	5	1.04	1	.21	20.15	4.69
	119–127	Diseases of the genito-urinary system	41	9.54	6	1.25	2	.42	4.09	.95
	142–145	Diseases of the skin and cellular tissue	124	28.87					2.94	.69
	146–149	Diseases of the organs of locomotion	106	24.67	2	.42			4.81	1.12
	150	Malformations, etc	6	1.40					.09	.02
	154	Diseases, results of old age								
	189	Ill-defined diseases	21	4.89					.35	.08
		Total for disease	1,799	418.76	36	7.52	14	2.92	82.17	19.13
	155–186	External causes	423	98.46			14	2.92	20.20	4.70
			2,222	517.23	36	7.52	28	5.85	102.37	23.83

[1] Noneffectiveness for individual external causes not tabulated.

ratios per 1,000 of mean strength, for the Army, officers and total American troops, year 1913—Continued.

American troops, Army.								Officers and American troops, Army.							
S. G. O., 80766—A. G. O., 81697.								S. G. O., 85062—A. G. O., 86484.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
10	0.12			42	0.51			10	0.12			43	0.50		
247	3.06							263	3.09						
104	1.29							107	1.26						
41	.51			9	.11			42	.49			9	.10		
1	.01							1	.01						
332	4.11	2	0.02	1	.01			335	3.94	2	0.02	1	.01		
3	.04			1	.01			3	.04			1	.01		
				29	.35							32	.37		
176	2.18	20	.24	11	.13			180	2.12	20	.24	12	.14		
7	.09			2	.02			7	.08			2	.02		
950	11.76	6	.07	1	.01			964	11.33	6	.07	1	.01		
3,315	41.04	34	.42	16	.20			3,477	40.88	34	.42	16	.19		
1	.01							1	.01						
98	1.21	4	.05					104	1.22	4	.05				
577	7.14	3	.04	42	.51			594	6.98	3	.04	48	.56		
1,015	12.56	9	.11	2	.02			1,071	12.59	9	.11	2	.02		
28	.35	3	.04	1	.01			28	.33	3	.04	1	.01		
141	1.75			2	.02			147	1.73			2	.02		
2	.02			3	.04			2	.02			3	.03		
2	.02			1	.01			2	.02			1	.01		
5	.06			17	.21			5	.06			17	.20		
2	.02							2	.02						
3,826	47.37	16	.20	4	.05			3,942	46.34	16	.20	4	.05		
132	1.63	8	.10					147	1.73	8	.10				
10	.12	2	.02	3	.04			14	.16	2	.02	6	.07		
4	.05	2	.02	2	.02			7	.08	2	.02	5	.06		
5	.06			1	.01			5	.06			1	.01		
1	.01							2	.02						
16,769	207.62	352	4.31	85	1.04	782.19	9.69	17,173	201.89	352	4.31	88	1.02	806.63	9.48
6,591	81.61	5	.06	23	.28	172.74	2.14	6,912	81.26	5	.06	23	.27	180.38	2.12
10,178	126.02	347	4.25	62	.76	609.45	7.55	10,261	120.63	347	4.25	65	.75	626.25	7.36
2,249	27.84	370	4.53	18	.22	173.85	2.16	2,429	28.55	370	4.53	20	.23	189.00	2.22
1,147	14.20	335	4.10	16	.20	132.62	1.64	1,250	14.69	335	4.10	18	.21	144.63	1.70
655	8.11	23	.28			24.64	.31	702	8.25	23	.28			26.02	.31
447	5.53	12	.15	2	.02	16.59	.21	477	5.61	12	.15	2	.02	18.36	.22
1,418	17.56	47	.58	24	.29	77.11	.95	1,468	17.26	47	.58	29	.34	80.77	.95
3,994	49.45	23	.28	30	.37	100.30	1.24	4,277	50.28	23	.28	31	.36	106.78	1.26
11,176	138.38	31	.38	30	.37	245.13	3.04	11,760	138.25	31	.38	31	.36	265.29	3.12
742	9.19	40	.49	17	.21	37.39	.46	783	9.21	40	.49	19	.22	41.48	.49
4,258	52.72	9	.11			100.56	1.25	4,382	51.52	9	.11			103.51	1.22
1,882	23.30	98	1.20	1	.01	78.80	.98	1,988	23.37	98	1.20	1	.01	83.61	.98
308	3.81	1	.01			8.60	.11	314	3.69	1	.01			8.69	.10
		1	.01							1	.01				
435	5.39	3	.04	5	.06	13.12	.16	456	5.36	3	.04	5	.06	13.47	.16
43,231	535.26	975	11.93	210	2.57	1,617.06	20.02	45,030	529.38	975	11.93	224	2.59	1,699.23	19.98
11,026	136.52	107	1.31	187	2.29	347.73	4.31	11,449	134.60	107	1.31	201	2.32	367.93	4.32
54,257	671.78	1,082	13.24	397	4.86	1,964.79	24.33	56,479	663.97	1,082	13.24	425	4.91	2,067.16	24.30

TABLE No. 70.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with*

Serial No.	International classification.	Causes of admission to sick report.	The Army, enlisted men, white and colored. Mean strength..... S. G. O., 80766—A. G. O., 81697. Admissions. Number.	Admissions. Ratio.	Discharges. Number.	Discharges. Ratio.	Deaths. Number.	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
1	1	Typhoid fever	4	0.05	.....	.....	.....	.....	0.65	0.01
2	1a	Paratyphoid fever	5	.06	.....	.....	.....	.....	.70	.01
5	2	Typhus fever	3	.04	.....	.....	.....	.....	.52	.01
7–11	4	Malaria	1,999	24.75	1	0.01	2	0.02	42.76	.53
7	.....	Estivo-autumnal fever	412	5.10	.....	.....	2	.02	12.81	.16
8	.....	Malarial cachexia	16	.20	1	.01	.....	.....	2.05	.03
9	.....	Quartan malarial fever	24	.30	.....	.....	.....	.....	.44	.01
10	.....	Tertian malarial fever	1,411	17.47	.....	.....	.....	.....	25.18	.31
11	.....	Undetermined malarial fever	136	1.68	.....	.....	.....	.....	2.28	.03
12	5	Smallpox and varioloid	8	.10	.....	.....	2	.02	.57	.01
13	5b	Vaccinia	704	8.72	.....	.....	.....	.....	9.18	.11
14	6	Measles	520	6.44	1	.01	11	.13	28.76	.36
15	7	Scarlet fever	4	.05	.....	.....	.....	.....	.56	.01
17	9	Diphtheria	23	.28	.....	.....	.....	.....	1.21	.02
18	10	Influenza	1,221	15.12	.....	.....	.....	.....	17.83	.22
19	12	Asiatic cholera	1	.01	.....	.....	1	.01	.01	.00
21–23	14	Dysentery	309	3.83	3	.04	7	.09	20.64	.26
21	.....	Bacillary	16	.20	.....	.....	.....	.....	1.25	.02
22	.....	Entamebic	239	2.96	3	.04	7	.09	17.73	.22
23	.....	Unclassified	54	.67	.....	.....	.....	.....	1.66	.02
27	18	Erysipelas	41	.51	.....	.....	.....	.....	2.41	.03
29	19b	Dengue	452	5.60	.....	.....	.....	.....	6.51	.08
31	19d	German measles	197	2.44	.....	.....	.....	.....	5.10	.06
34	19g	Mumps	634	7.85	.....	.....	.....	.....	29.93	.37
37	20	Purulent infection and septicemia	9	.11	1	.01	5	.06	1.10	.01
42–46	25	Mycoses	5	.06	.....	.....	.....	.....	.58	.01
47	.....	Pellagra	1	.01	1	.01	.....	.....	.22	.00
48	27	Beriberi	.....	.....	.....	.....	.....	.....	.....	.....
49–57	28–34	Tuberculosis, all	296	3.66	185	2.26	40	.49	156.66	1.94
49–51	28	Tuberculosis of lungs	260	3.22	168	2.06	28	.34	145.85	1.81
52	29	Miliary tuberculosis, acute	5	.06	.....	.....	5	.06	.50	.01
53–57	30–34	Tuberculosis of other organs	31	.38	17	.21	7	.09	10.30	.13
59–74	37–38	Venereal diseases, all	7,852	97.22	92	1.13	5	.06	364.34	4.51
59–64	37	Syphilis	1,875	23.22	32	.39	5	.06	108.49	1.34
65–67	38a	Soft chancre	1,510	18.70	1	.01	.....	.....	59.37	.74
68–74	38b	Gonococcus infection	4,467	55.31	59	.72	.....	.....	196.48	2.43
75–79	39–45	Cancer and other malignant tumors	16	.20	5	.06	6	.07	4.35	.05
80	46	Benign tumors	112	1.39	3	.04	.....	.....	5.16	.06
81–85	47–48	Rheumatism, articular, all	547	6.77	17	.21	.....	.....	45.44	.56
81–82	47	Acute articular rheumatism	430	5.32	4	.05	.....	.....	29.19	.36
83–85	48	Chronic articular rheumatism	117	1.45	13	.16	.....	.....	16.24	.20
87–88	50	Diabetes	15	.19	8	.10	2	.02	3.02	.04
89	51	Exophthalmic goitre	11	.14	3	.04	.....	.....	2.29	.03
97–100	56	Alcoholism and results	1,216	15.06	18	.22	3	.04	18.71	.23
101–102	57–58	Chronic occupational poisoning	3	.04	.....	.....	.....	.....	.59	.01
103–104	59	Other chronic poisoning, including drug habit	58	.72	8	.10	.....	.....	2.22	.03
105–106	60	Encephalitis	2	.02	.....	.....	1	.01	.05	.00
107	61	Simple meningitis	4	.05	2	.02	2	.02	.43	.01
108	61a	Epidemic cerebrospinal meningitis	35	.43	3	.04	11	.13	6.24	.08
109	62	Locomotor ataxia	2	.02	3	.04	.....	.....	.96	.01
110–115	63	Other diseases of spinal cord	8	.10	10	.12	.....	.....	3.64	.05
116	64	Cerebral hemorrhage, apoplexy	4	.05	.....	.....	2	.02	.05	.00
117–119	66	Paralysis without specified cause	22	.27	.....	.....	.....	.....	1.36	.02
120–126	67–68	Mental alienation	278	3.44	210	2.57	.....	.....	64.39	.80
127	69	Epilepsy	116	1.44	50	.61	.....	.....	11.96	.15
129–133	73	Neuralgia and neuritis	422	5.22	25	.31	.....	.....	24.96	.31
138–141	75a	Conjunctivitis	294	3.64	.....	.....	.....	.....	5.15	.06
142	75b	Trachoma	17	.21	7	.09	.....	.....	2.19	.03
166	77	Pericarditis	4	.05	1	.01	1	.01	.99	.01
167	78	Acute endocarditis	6	.07	.....	.....	1	.01	.92	.01
169–174	79	Organic heart disease	104	1.29	34	.42	15	.18	13.58	.17
175	80	Angina pectoris	14	.17	.....	.....	.....	.....	.36	.00
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc	12	.15	5	.06	5	.06	2.73	.03

ratios per 1,000 of mean strength, for the enlisted American troops of the Army, year 1913.

The Army, white, enlisted men.								The Army, colored, enlisted men.							
S. G. O., 76135—A. G. O., 77066.								S. G. O., 4631—A. G. O., 4631.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
4	0.05					0.65	0.01								
5	.07					.70	.01								
3	.04					.52	.01								
1,909	25.07	1	0.01	2	0.03	40.99	.54	90	19.44					1.78	0.38
391	5.14			2	.03	12.23	.16	21	4.53					.58	.12
16	.21	1	.01			2.05	.03								
23	.30					.43	.01	1	.22					.02	.01
1,362	17.89					24.28	.32	49	10.58					.90	.19
117	1.54					2.00	.03	19	4.10					.29	.06
8	.11			2	.03	.57	.01								
703	9.23					9.18	.12	1	.22					.01	.00
506	6.65	1	.01	11	.14	27.82	.37	14	3.02					.94	.20
4	.05					.56	.01								
23	.30					1.21	.02								
1,176	15.44					16.98	.22	45	9.72					.85	.18
1	.01			1	.01	.01	.00								
294	3.86	3	.04	7	.09	19.87	.26	15	3.24					.77	.17
15	.20					1.24	.02	1	.22					.02	.00
229	3.01	3	.04	7	.09	17.15	.23	10	2.16					.58	.13
50	.66					1.49	.02	4	.86					.17	.04
38	.50					2.24	.03	3	.65					.18	.04
228	2.99					3.29	.04	224	48.37					3.22	.70
197	2.59					5.10	.07								
553	7.26					25.82	.34	81	17.49					4.12	.89
9	.12	1	.01	5	.06	1.10	.01								
5	.07					.58	.01								
1	.01	1	.01			.22	.00								
261	3.43	168	2.18	29	.38	141.63	1.86	35	7.56	17	3.67	11	2.38	15.03	3.24
232	3.05	153	1.99	20	.26	132.20	1.74	28	6.05	15	3.24	8	1.73	13.65	2.95
2	.03			2	.03	.18	.00	3	.65			3	.65	.33	.07
27	.35	15	.19	7	.09	9.25	.12	4	.86	2	.43			1.05	.23
7,167	94.14	82	1.06	3	.04	324.58	4.26	685	147.92	10	2.16	2	.43	39.76	8.58
1,725	22.66	26	.34	3	.04	97.51	1.28	150	32.39	6	1.30	2	.43	10.98	2.37
1,356	17.81					51.09	.67	154	33.25	1	.22			8.28	1.79
4,086	53.67	56	.73			175.98	2.31	381	82.27	3	.65			20.50	4.43
16	.21	5	.06	6	.08	4.35	.06								
106	1.39	3	.04			4.95	.07	6	1.30					.21	.04
524	6.88	15	.19			42.34	.56	23	4.97	2	.43			3.10	.67
418	5.49	4	.05			28.58	.38	12	2.59					.61	.13
106	1.39	11	.14			13.76	.18	11	2.38	2	.43			2.48	.54
14	.18	8	.10	2	.03	2.99	.04	1	.22					.02	.01
10	.13	3	.04			2.07	.03	1	.22					.22	.05
1,188	15.60	18	.23	3	.04	17.97	.24	28	6.05					.75	.16
3	.04					.59	.01								
58	.76	8	.10			2.22	.03							.01	.00
2	.03			1	.01	.05	.00								
3	.04	2	.03	2	.03	.29	.00	1	.22					.14	.03
35	.46	3	.04	11	.14	6.24	.08								
2	.03	3	.04			.96	.01								
7	.09	9	.12			2.99	.04	1	.22	1	.22			.64	.14
4	.05			2	.03	.05	.00								
22	.29					1.36	.02								
266	3.49	202	2.62			60.01	.79	12	2.59	8	1.73			4.38	.95
114	1.50	49	.64			11.76	.15	2	.43	1	.22			.20	.04
376	4.94	23	.30			22.47	.30	46	9.93	2	.43			2.50	.54
269	3.53					4.75	.06	25	5.40					.41	.09
17	.22	7	.09			2.19	.03								
4	.05	1	.01	1	.01	.99	.01								
5	.07			1	.01	.42	.01	1	.22					.01	.00
85	1.12	32	.42	13	.17	11.95	.16	19	4.10	2	.43	2	.43	1.63	.35
14	.18					.36	.00								
12	.16	5	.06	5	.06	2.73	.04								

TABLE No. 70.—*Admissions to sick report, discharges, deaths, and noneffectiveness, year 1913—*

Serial No.	International classification.	Causes of admission to sick report.	The Army, enlisted men, white and colored. Mean strength..... S. G. O., 80766—A. G. O., 81697. Admissions. Number.	Admissions. Ratio.	Discharges. Number.	Discharges. Ratio.	Deaths. Number.	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
178–179	82	Embolism and thrombosis	5	0.06	2	0.02	2	0.02	.77	0.01
181	83b	Hemorrhoids	457	5.66					13.72	.17
183	83d	Varicose veins	61	.76	1	.01			4.43	.05
184	83e	Varicocele	209	2.59	1	.01			10.83	.13
185–187	84	Diseases of the lymphatic system	445	5.51					24.00	.30
193–199	86	Diseases of the nasal fossæ	779	9.65					9.69	.12
200–202	87	Diseases of the larynx	190	2.35					3.12	.04
203–204	88	Diseases of the thyroid body	13	.16	2	.02			1.18	.01
205–206	89–90	Bronchitis	2,457	30.42	6	.07			49.92	.62
207	91	Bronchopneumonia	23	.28			3	.04	2.13	.03
208	92	Pneumonia	179	2.22	3	.04	23	.28	15.02	.19
209–215	93	Pleurisy	212	2.62	7	.09	4	.05	12.68	.16
216–217	94	Pulmonary congestion and pulmonary apoplexy	41	.51					.58	.01
219	96	Asthma	77	.95	4	.05			4.62	.06
220	97	Pulmonary emphysema	1	.01					.02	.00
221	98a	Hæmoptysis	7	.09					.25	.00
222	98b	Hay fever							.01	.00
224–227	99a	Diseases of the teeth and gums	366	4.53	1	.01			6.19	.08
228–231	99b	Other diseases of the mouth and annexa	67	.83					1.91	.02
232–236	100	Diseases of the pharynx	3,919	48.52	1	.01			55.72	.69
238	102	Ulcer of stomach	15	.19	1	.01			2.85	.04
239–244	103	Other diseases of stomach (cancer excepted)	997	12.34	1	.01			19.51	.24
45–253	105	Diarrhea and enteritis	2,578	31.92	2	.02	4	.05	32.48	.40
254	106	Ankylostomiasis	93	1.15			1	.01	2.23	.03
255–259	107	Intestinal parasites	100	1.24					2.02	.02
260	108	Appendicitis	580	7.18	4	.05	9	.11	42.06	.52
261–263	109	Hernia	291	3.60	13	.16	5	.06	32.70	.40
264–267	110a	Diseases of the anus and fecal fistula	79	.98	1	.01			5.11	.06
268–272	110b	Other diseases of the intestines	1,751	21.68	4	.05			23.81	.29
275	113	Cirrhosis of liver	3	.04			1	.01	.37	.00
276	114	Biliary calculi	16	.20	1	.01			1.10	.01
277–281	115	Other diseases of liver and gall bladder	304	3.76	2	.02	4	.05	15.26	.19
283–284	117	Simple peritonitis	6	.07			2	.02	.92	.01
288	119	Acute nephritis	21	.26			6	.07	1.13	.01
289–291	120	Bright's disease	52	.64	17	.21	11	.13	8.66	.11
293–299	122	Other diseases of the kidney and annexa	18	.22	2	.02			2.48	.03
303–306	124	Diseases of the bladder	163	2.02	21	.26			9.77	.12
304	124b	Enuresis	85	1.05	21	.26			6.45	.08
307–309	125	Diseases of the urethra, urinary abscess, etc.	67	.83					1.64	.02
310–312	126	Diseases of the prostate	10	.12					.85	.01
313–319	127	Diseases of the male genital organs (nonvenereal)	373	4.62					11.33	.14
322–323	143	Furuncle and carbuncle	1,349	16.70					23.19	.29
324–325	144	Acute abscess and cellulitis	846	10.48	2	.02			24.46	.30
352–357	146	Diseases of the bones	146	1.81	3	.04	1	.01	8.92	.11
358–360	147	Diseases of the joints	286	3.54	16	.20			19.95	.25
367	149g	Flat foot	161	1.99	67	.82			13.66	.17
372	150	Congenital malformations	308	3.81	1	.01			8.60	.11
373–374	154	Senility			1	.01				
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	231	2.86					3.73	.05
379	189Ba	Under observation, undiagnosed and unknown	105	1.30	3	.04	5	.06	6.97	.09
380	189Bb	Malingering	32	.40					1.79	.02
		For diseases not mentioned above.	5,132	63.54	89	1.09	7	.09	161.18	2.00

th ratios per 1,000 of mean strength, for the enlisted American troops of the Army,
ntinued.

The Army, white, enlisted men.								The Army, colored, enlisted men.							
S. G. O., 76135—A. G. O., 77066.								S. G. O., 4631—A. G. O., 4631.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
5	0.07	2	0.03	2	0.03	0.77	0.01								
408	5.36					12.37	.16	49	10.58					1.35	0.29
60	.79	1	.01			4.34	.06	1	.22					.09	.02
206	2.71	1	.01			10.63	.14	3	.65					.20	.04
424	5.57					22.47	.30	21	4.53					1.53	.33
739	9.71					9.13	.12	40	8.64					.56	.12
171	2.25					2.61	.03	19	4.10					.51	.11
13	.17	2	.03			1.18	.02								
,262	29.71	6	.08			46.41	.61	195	42.10					3.51	.76
22	.29			3	.04	1.77	.02	1	.22					.36	.08
163	2.14	3	.04	21	.27	14.00	.18	16	3.46			2	.43	1.01	.22
206	2.71	7	.09	4	.05	12.41	.16	6	1.30					.27	.06
41	.54					.58	.01								
67	.88	4	.05			4.09	.05	10	2.16					.53	.12
1	.01					.02	.00								
4	.05					.16	.00	3	.65					.08	.02
						.01	.00								
346	4.54	1	.01			5.85	.08	20	4.32					.35	.07
60	.79					1.82	.02	7	1.51					.10	.02
,733	49.03	1	.01			53.02	.70	186	40.16					2.71	.59
14	.18	1	.01			2.53	.03	1	.22					.32	.07
911	11.97	1	.01			18.28	.24	86	18.57					1.23	.27
,410	31.65	2	.03	4	.05	30.48	.40	168	36.28					1.99	.43
93	1.22			1	.01	2.23	.03								
96	1.26					1.95	.03	4	.86					.07	.01
560	7.36	4	.05	9	.12	40.53	.53	20	4.32					1.53	.33
270	3.55	12	.16	5	.06	30.03	.39	21	4.53	1	.22			2.67	.58
75	.99	1	.01			4.93	.06	4	.86					.18	.04
,614	21.20	4	.05			22.17	.29	137	29.58					1.63	.35
3	.04			1	.01	.37	.00								
14	.18	1	.01			.99	.01	2	.43					.11	.02
298	3.91	2	.03	3	.04	14.82	.19	6	1.30			1	.22	.44	.10
6	.08			2	.03	.92	.01								
21	.28			6	.08	1.13	.01								
47	.62	14	.18	11	.14	7.96	.10	5	1.08	3	.65			.70	.15
17	.22	2	.03			2.47	.03	1	.22					.02	.00
145	1.90	19	.25			8.82	.12	18	3.89	2	.43			.95	.21
76	1.00	19	.25			5.69	.07	9	1.94	2	.43			.75	.16
61	.80					1.56	.02	6	1.30					.07	.02
10	.13					.85	.01								
353	4.64					10.87	.14	20	4.32					.46	.10
,297	17.04					22.15	.29	52	11.23					1.04	23
818	10.74	2	.03			23.64	.31	28	6.05					.82	.18
139	1.83	2	.03	1	.01	7.91	.10	7	1.51	1	.22			1.00	.22
268	3.52	13	.17			18.40	.24	18	3.89	3	.65			1.55	.33
155	2.04	67	.87			13.43	.18	6	1.30					.23	.05
295	3.87	1	.01			8.24	.11	13	2.81					.36	.08
		1	.01												
200	2.63					3.42	.04	31	6.69					.31	.07
98	1.29	2	.03	5	.06	6.49	.09	7	1.51	1	.22			.48	.10
22	.29					.96	.01	10	2.16					.83	.10
,851	63.72	87	1.13	7	.09	151.90	2.00	281	60.68	2	.43			9.28	2.08

TABLE No. 70.—*Admissions to sick report, discharges, deaths, and noneffectiveness, year 191:*

Serial No.	International classification.	Causes of admission to sick report.	The Army, enlisted men, white and colored. S. G. O., 80766—A. G. O., 81697. Admissions. Number.	Admissions. Ratio.	Discharges. Number.	Discharges. Ratio.	Deaths. Number.	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[1]								
426–434	155–163	Suicides, all	10	0.12	.....	.....	42	0.51	.....	.....
435	164	Poisoning by food	247	3.06	.....	.....	.....	.....	.....	.....
436	165a	Venomous bites and stings	104	1.29	.....	.....	.....	.....	.....	.....
437	165b	Other poisoning (deleterious gases excepted)	41	.51	.....	.....	9	.11	.....	.....
438	166	Conflagration	1	.01	.....	.....	.....	.....	.....	.....
439	167	Burns (conflagrations excepted)	332	4.11	2	0.02	1	.01	.....	.....
440	168	Absorption of deleterious gases	3	.04	.....	.....	1	.01	.....	.....
442	169	Drowning, accidental	.....	.....	.....	.....	29	.35	.....	.....
443	170	Traumatism by firearms (other than specified)	176	2.18	20	.24	11	.13	.....	.....
444	170a	Shot by sentry or guard	7	.09	.....	.....	2	.02	.....	.....
445	171	Traumatism by cutting or piercing instruments	950	11.76	6	.07	1	.01	.....	.....
446	172	Traumatism by fall	3,315	41.04	34	.42	16	.20	.....	.....
447	173	Traumatism in mines and quarries	1	.01	.....	.....	.....	.....	.....	.....
448	174	Traumatism by machines	98	1.21	4	.05	.....	.....	.....	.....
449	175	Traumatism by other crushing	577	7.14	3	.04	42	.51	.....	.....
450	176	Injuries by animals	1,015	12.56	9	.11	2	.02	.....	.....
452	178	Effects of excessive cold	28	.35	3	.04	1	.01	.....	.....
453	179	Effects of heat	141	1.75	.....	.....	2	.02	.....	.....
454	180	Effects of lightning	2	.02	.....	.....	3	.04	.....	.....
455	181	Effects of electricity	2	.02	.....	.....	1	.01	.....	.....
456–458	182–184	Homicides, all	5	.06	.....	.....	17	.21	.....	.....
459	185	Fractures, causes not specified	2	.02	.....	.....	.....	.....	.....	.....
460	186	Other external violence	3,826	47.37	16	.20	4	.05	.....	.....
425	186	Secondary results of injury	132	1.63	8	.10	.....	.....	.....	.....
462–466	.....	Killed or wounded in action	10	.12	2	.02	3	.04	.....	.....
462	.....	By bullet	4	.05	2	.02	2	.02	.....	.....
465	.....	By bolo, kris, etc	5	.06	.....	.....	1	.01	.....	.....
466	.....	By other weapon	1	.01	.....	.....	.....	.....	.....	.....
		DISEASES AND INJURIES GROUPED.								
		General diseases	16,769	207.62	352	4.31	85	1.04	782.19	9.6
	1–19	Epidemic diseases	6,591	81.61	5	.06	23	.28	172.74	2.1
	20–59	Other general diseases	10,178	126.02	347	4.25	62	.76	609.45	7.5
		Diseases of the nervous system and organs of special sense	2,249	27.84	370	4.53	18	.22	173.85	2.1
	60–74	Of the nervous system	1,147	14.20	335	4.10	16	.20	132.62	1.6
	75	Of the eye and its annexa	655	8.11	23	.28	.....	.....	24.64	.3
	76	Of the ear and its annexa	447	5.53	12	.15	2	.02	16.59	.2
	77–85	Diseases of the circulatory system	1,418	17.56	47	.58	24	.29	77.11	.9
	86–98	Diseases of the respiratory system	3,994	49.45	23	.28	30	.37	100.30	1.2
	99–118	Diseases of the digestive system	11,176	138.38	31	.38	30	.37	245.13	3.0
	119–127	Diseases of the genito-urinary system	742	9.19	40	.49	17	.21	37.39	.4
	142–145	Diseases of the skin and cellular tissue	4,258	52.72	9	.11	.....	.....	100.56	1.2
	146–149	Diseases of the organs of locomotion	1,882	23.30	98	1.20	1	.01	78.80	.9
	150	Malformations, etc	308	3.81	1	.01	.....	.....	8.60	.1
	154	Diseases, results of old age	.....	.....	1	.01	.....	.....	.....	.....
	189	Ill-defined diseases	435	5.39	3	.04	5	.06	13.12	.1
		Total for disease	43,231	535.26	975	11.93	210	2.57	1,617.06	20.0
	155–186	External causes	11,026	136.52	107	1.31	187	2.29	347.73	4.3
		Total for disease and external causes	54,257	671.78	1,082	13.24	397	4.86	1,964.79	24.3

[1] Noneffectiveness for individual external causes not tabulated.

with ratios per 1,000 of mean strength, for the enlisted American troops of the Army, Continued.

The Army, white, enlisted men.								The Army, colored, enlisted men.							
S. G. O., 76135—A. G. O., 77066.								S. G. O., 4631—A. G. O., 4631.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
9	0.12			39	0.51			1	0.22			3	0.65		
243	3.19							4	.86						
94	1.23							10	2.16						
40	.53			9	.12			1	.22						
1	.01														
317	4.16	2	0.03	1	.01			15	3.24						
3	.04			1	.01										
				26	.34							3	.65		
166	2.18	19	.25	10	.13			10	2.16	1	0.22	1	.22		
7	.09			2	.03										
890	11.69	6	.08	1	.01			60	12.96						
3,099	40.70	32	.42	16	.21			216	46.64	2	.43				
1	.01														
96	1.26	4	.05					2	.43						
559	7.34	2	.03	42	.55			18	3.89	1	.22				
946	12.42	8	.10	2	.03			69	14.90	1	.22				
25	.33	3	.04	1	.01			3	.65						
132	1.73			2	.03			9	1.94						
2	.03			3	.04										
2	.03			1	.01										
5	.07			15	.19							2	.43		
2	.03														
3,624	47.60	16	.21	4	.05			202	43.62						
120	1.58	8	.10					12	2.59						
10	.13	2	.03	3	.04										
4	.05	2	.03	2	.03										
5	.07			1	.01										
1	.01														
15,511	203.73	323	4.19	72	.93	710.95	9.34	1,258	271.65	29	6.26	13	2.81	71.24	15.38
6,112	80.28	5	.06	23	.30	160.58	2.11	479	103.43					12.15	2.62
9,399	123.45	318	4.13	49	.64	550.36	7.23	779	168.22	29	6.26	13	2.81	59.09	12.76
2,107	27.68	356	4.63	18	.24	162.24	2.14	142	30.66	14	3.03			11.61	2.52
1,064	13.98	322	4.18	16	.21	123.75	1.63	83	17.92	13	2.81			8.87	1.92
611	8.03	22	.29			22.72	.30	44	9.50	1	.22			1.92	.42
432	5.67	12	.16	2	.03	15.77	.21	15	3.24					.82	.18
1,314	17.26	45	.58	22	.29	71.88	.94	104	22.46	2	.43	2	.43	5.23	1.13
3,703	48.64	23	.30	28	.36	93.44	1.23	291	62.84			2	.43	6.86	1.48
10,513	138.08	30	.39	29	.38	231.69	3.04	663	143.17	1	.22	1	.22	13.44	2.90
692	9.09	35	.45	17	.22	35.15	.46	50	10.80	5	1.08			2.23	.48
4,075	53.52	9	.12			95.98	1.26	183	39.52					4.59	.99
1,748	22.96	94	1.22	1	.01	73.68	.97	134	28.94	4	.86			5.11	1.10
295	3.87	1	.01			8.24	.11	13	2.81					.36	.08
		1	.01												
385	5.06	2	.03	5	.06	11.49	.15	50	10.80	1	.22			1.63	.35
40,343	529.89	919	11.92	192	2.49	1,494.75	19.65	2,888	623.62	56	12.09	18	3.89	122.31	26.41
10,394	136.52	102	1.32	178	2.31	329.86	4.33	632	136.47	5	1.08	9	1.94	17.87	3.86
50,737	666.41	1,021	13.25	370	4.80	1,824.62	23.97	3,520	760.10	61	13.17	27	5.83	140.18	30.27

TABLE NO. 71.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with continental, excluding*

Serial Nos.	International classification.	Causes of admission to sick report.	United States, total enlisted men, white and colored.									
		Mean strength	S. G. O., 59608—A. G. O., 60215.									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
1	1	Typhoid fever	3	0.05							0.46	0.01
2	1a	Paratyphoid fever	3	.05							.52	.01
7–11	4	Malaria	524	8.79	1	1	0.02				10.80	.18
7		Estivo-autumnal fever	40	.67							1.15	.02
8		Malarial cachexia	1	.02	1	1	.02				.80	.01
9		Quartan malarial fever	12	.20							.19	.00
10		Tertian malarial fever	424	7.11							7.88	.13
11		Undetermined malarial fever	47	.79							.78	.01
12	5	Smallpox and varioloid	2	.03							.13	.00
13	5b	Vaccinia	701	11.76							9.08	.15
14	6	Measles	457	7.67	1	1	.02	11	11	0.18	24.90	.42
15	7	Scarlet fever	3	.05							.48	.01
17	9	Diphtheria	18	.30							1.02	.02
18	10	Influenza	903	15.15							12.96	.22
21–23	14	Dysentery	65	1.09	3	2	.03	1	1	.02	5.94	.10
21		Bacillary	5	.08							.44	.01
22		Entamebic	42	.70	3	2	.03	1	1	.02	4.88	.08
23		Unclassified	18	.30							.62	.01
27	18	Erysipelas	41	.69							2.40	.04
29	19b	Dengue	11	.18							.19	.00
31	19d	German measles	159	2.67							4.11	.07
34	19g	Mumps	494	8.29							22.59	.38
37	20	Purulent infection and septicemia	8	.13	1	1	.02	4	4	.07	.99	.02
42–46	25	Mycoses	3	.05							.11	.00
47	26	Pellagra	3	.02	1	1	.02				.22	.00
49–57	28–34	Tuberculosis, all	183	3.07	185	130	2.16	35	24	.40	139.31	2.34
49–51	28	Tuberculosis of lungs	156	2.62	168	116	1.93	26	16	.27	130.12	2.18
52	29	Miliary tuberculosis, acute	2	.03				2	2	.03	.17	.00
53–57	30–34	Tuberculosis of other organs	25	.42	17	14	.23	7	6	.10	9.01	.15
59–74	37–38	Venereal diseases, all	5,116	85.83	91	61	1.01	4	4	.07	213.43	3.58
59–64	37	Syphilis	1,251	20.99	31	21	.35	4	4	.07	69.88	1.17
65–67	38a	Soft chancre	917	15.38	1						33.97	.57
68–74	38b	Gonococcus infection	2,948	49.46	59	40	.66				109.59	1.84
75–79	39–45	Cancer and other malignant tumors	15	.25	5	5	.08	5	5	.08	4.14	.07
80	46	Benign tumors	76	1.27	3	2	.03				3.84	.06
81–85	47–48	Rheumatism, articular, all	456	7.65	17	15	.25				37.62	.63
81–82	47	Acute articular rheumatism	368	6.17	4	4	.07				25.72	.43
83–85	48	Chronic articular rheumatism	88	1.48	13	11	.18				11.90	.20
87–88	50	Diabetes	12	.20	8	6	.10	2	2	.03	2.55	.04
89	51	Exophthalmic goiter	9	.15	3	2	.03				1.73	.03
97–100	56	Alcoholism and results	849	14.24	18	12	.20	3	3	.05	12.44	.21
101–102	57–58	Chronic occupational poisoning	2	.03							.18	.00
103–104	59	Other chronic poisoning, including drug habit	49	.82	8	7	.12				2.01	.03
105–106	60	Encephalitis	2	.03				1	1	.02	.05	.00
107	61	Simple meningitis	4	.07	2	2	.03	2	2	.03	.43	.01
108	61a	Epidemic cerebrospinal meningitis	32	.54	3	3	.05	11	11	.18	5.22	.09
109	62	Locomotor ataxia	2	.03	3	2	.03				.89	.01
110–115	63	Other diseases of spinal cord	5	.08	10	7	.12				2.98	.05
116	64	Cerebral hemorrhage, apoplexy	3	.05				1	1	.02	.05	.00
117–119	66	Paralysis without specified cause	15	.25							.64	.01
120–126	67–68	Mental alienation	174	2.92	207	135	2.24				48.36	.81
127	69	Epilepsy	93	1.56	50	44	.73				9.39	.16
129–133	73	Neuralgia and neuritis	301	5.05	25	18	.30				18.61	.31
138–141	75a	Conjunctivitis	219	3.67							3.95	.07
142	75b	Trachoma	16	.27	7	7	.12				2.16	.04
166	77	Pericarditis	3	.05	1	1	.02	1	1	.02	.68	.01
167	78	Acute endocarditis	4	.07							.37	.01
169–174	79	Organic heart disease	76	1.27	34	29	.48	13	13	.22	11.40	.19
175	80	Angina pectoris	12	.20							.32	.01

[1] Including those occurring in the United States proper from commands on duty in Alaska or insular possessions.

ratios per 1,000 of mean strength, for enlisted American troops serving in the United States, Alaska, for the year 1913.

United States, white, enlisted men. S. G. O., 57912—A. G. O., 58519.									United States, colored, enlisted men. S. G. O., 1696—A. G. O., 1696.								
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.	Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
3	0.05							0.46	0.01										
3	.05							.52	.01										
511	8.82	1	1	0.02				10.59	.18	13	7.67							0.21	0.12
40	.69							1.15	.02										
1	.02	1	1	.02				.80	.01										
12	.21							.19	.00										
422	7.29							7.86	.14	2	1.18							.02	.01
36	.62							.60	.01	11	6.49							.19	.11
2	.03							.13	.00										
700	12.09							9.07	.16	1	.59							.01	.00
450	7.77	1	1	.02	11	11	0.19	24.41	.42	7	4.13							.49	.29
3	.05							.48	.01										
18	.31							1.02	.02										
886	15.30							12.58	.22	17	10.02							.39	.23
60	1.04	3	2	.03	1	1	.02	5.62	.10	5	2.95							.32	.19
5	.09							.44	.01										
39	.67	3	2	.03	1	1	.02	4.70	.08	3	1.77							.17	.10
16	.28							.47	.01	2	1.18							.15	.09
38	.66							2.22	.04	3	1.77							.18	.11
11	.19							.19	.00										
159	2.75							4.11	.07										
454	7.84							20.34	.35	40	23.58							2.26	1.33
8	.14	1	1	.02	4	4	.07	.99	.02										
3	.05							.11	.00										
1	.02	1	1	.02				.22	.00										
174	3.00	168	126	2.15	26	23	.39	127.67	2.20	9	5.31	17	4	2.36	9	1	0.59	11.64	6.86
150	2.59	153	114	1.95	18	16	.27	119.45	2.06	6	3.54	15	2	1.18	8			10.67	6.29
1	.02				1	1	.02	.10	.00	1	.59				1	1	.59	.07	.04
23	.40	15	12	.21	7	6	.10	8.12	.14	2	1.18	2	2	1.18				.89	.53
4,936	85.23	81	57	.97	3	3	.05	205.75	3.55	180	106.13	10	4	2.36	1	1	.59	7.68	4.53
1,215	20.98	25	17	.29	3	3	.05	66.65	1.15	36	21.23	6	4	2.36	1	1	.59	3.23	1.90
875	15.11							32.31	.56	42	24.76	1						1.66	.98
2,846	49.14	56	40	.68				106.80	1.84	102	60.14	3						2.79	1.65
15	.26	5	5	.09	5	5	.09	4.14	.07										
74	1.28	3	2	.03				3.72	.06	2	1.18							.12	.07
446	7.70	15	14	.24				36.70	.63	10	5.90	2	1	.59				.92	.54
361	6.23	4	4	.07				25.49	.44	7	4.13							.23	.13
85	1.47	11	10	.17				11.21	.19	3	1.77	2	1	.59				.70	.41
12	.21	8	6	.10	2	2	.03	2.55	.04										
8	.14	3	2	.03				1.51	.03	1	.59							.22	.13
844	14.57	18	12	.21	3	3	.05	12.41	.21	5	2.95							.03	.02
2	.03							.18	.00										
49	.85	8	7	.12				2.01	.03									.01	.00
2	.03				1	1	.02	.05	.00										
3	.05	2	2	.03	2	2	.03	.29	.01	1	.59							.14	.08
32	.55	3	3	.05	11	11	.19	5.22	.09										
2	.03	3	2	.03				.89	.02										
5	.09	9	7	.12				2.62	.05			1						.36	.21
3	.05				1	1	.02	.05	.00										
15	.26							.64	.01										
172	2.97	199	133	2.27				46.06	.80	2	1.18	8	2	1.18				2.30	1.36
91	1.57	49	43	.73				9.19	.16	2	1.18	1	1	.59				.20	.12
282	4.87	23	18	.31				17.76	.31	19	11.20	2						.86	.51
209	3.61							3.72	.06	10	5.90							.23	.14
16	.28	7	7	.12				2.16	.04										
3	.05	1	1	.02	1	1	.02	.68	.01										
4	.07							.37	.01										
66	1.14	32	28	.48	12	12	.21	10.32	.18	10	5.90	2	1	.59	1	1	.59	1.08	.63
12	.21							.32	.01										

[1] Excluding those occurring in the United States proper from commands on duty in Alaska or insular possessions.

TABLE No. 71.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with continental, excluding Alaska,*

Serial Nos.	International classification.	Causes of admission to sick report.	United States, total enlisted men, white and colored.									
		Mean strength	S. G. O., 59,608—A. G. O., 60215.									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc	9	0.15	5	4	0.07	4	4	0.07	2.45	0.04
178–179	82	Embolism and thrombosis	3	.05	2	1	.02	1	1	.02	.45	.01
181	83b	Hemorrhoids	304	5.10							8.61	.14
183	83d	Varicose veins	36	.60	1	1	.02				2.87	.05
184	83e	Varicocele	125	2.10	1						6.28	.11
185–187	84	Diseases of the lymphatic system	279	4.68							15.77	.26
193–199	86	Diseases of the nasal fossæ	588	9.86							7.04	.12
200–202	87	Diseases of the larynx	153	2.57							2.34	.04
203–204	88	Diseases of the thyroid body	9	.15	2	2	.03				.80	.01
205–206	89–90	Bronchitis	1,716	28.79	6	5	.08				34.04	.57
207	91	Broncho-pneumonia	18	.30				3	3	.05	1.64	.03
208	92	Pneumonia	140	2.35	3	3	.05	19	19	.32	11.65	.20
209–215	93	Pleurisy	148	2.48	7	6	.10	4	4	.07	8.64	.14
216–217	94	Pulmonary congestion and pulmonary apoplexy	41	.69							.58	.01
219	96	Asthma	56	.94	4	3	.05				3.70	.06
221	98a	Hæmoptysis	3	.05							.03	.00
224–227	99a	Diseases of the teeth and gums	264	4.43	1	1	.02				3.87	.06
228–231	99b	Other diseases of the mouth and annexa	46	.77							1.04	.02
232–236	100	Diseases of the pharynx	3,174	53.25	1	1	.02				44.50	.75
238	102	Ulcer of stomach	10	.17	1	1	.02				1.73	.03
239–244	103	Other diseases of stomach (cancer excepted)	645	10.82	1	1	.02				12.59	.21
245–253	105	Diarrhea and enteritis	1,608	26.98	2	2	.03	4	4	.07	17.59	.30
254	106	Ankylostomiasis	80	1.34				1	1	.02	1.48	.02
255–259	107	Intestinal parasites	58	.97							1.15	.02
260	108	Appendicitis	418	7.01	4	2	.03	8	8	.13	27.95	.47
261–263	109	Hernia	208	3.49	13	10	.17	4	4	.07	21.97	.37
264–267	110a	Diseases of the anus and fecal fistula	60	1.01	1	1	.02				3.89	.07
268–272	110b	Other diseases of the intestines	1,072	17.98	4	3	.05				14.92	.25
276	114	Biliary calculi	12	.20	1	1	.02				.98	.02
277–281	115	Other diseases of liver and gall bladder	210	3.52	2	2	.03	2	2	.03	10.33	.17
283–284	117	Simple peritonitis	4	.07				1	1	.02	.36	.01
288	119	Acute nephritis	18	.30				5	5	.08	.99	.02
289–291	120	Bright's disease	45	.76	17	16	.27	9	9	.15	7.77	.13
293–299	122	Other diseases of the kidney and annexa	12	.20	2	2	.03				2.01	.03
303–306	124	Diseases of the bladder	114	1.91	21	14	.23				6.86	.12
304	124b	Enuresis	64	1.07	21	14	.23				5.30	.09
307–309	125	Diseases of the urethra, urinary abscess, etc	34	.57							.96	.02
310–312	126	Diseases of the prostate	7	.12							.43	.01
313–319	127	Diseases of the male genital organs (nonvenereal)	282	4.73							8.55	.14
322–323	143	Furuncle and carbuncle	812	13.62							13.49	.23
324–325	144	Acute abscess and cellulitis	533	8.94	2	2	.03				15.29	.26
352–357	146	Diseases of the bones	105	1.76	3	3	.05	1	1	.02	6.14	.10
358–360	147	Diseases of the joints	220	3.69	16	8	.13				14.71	.25
367	149g	Flat foot	133	2.23	67	54	.90				12.17	.20
372	150	Congenital malformations	253	4.24	1	1	.02				6.74	.11
373–374	154	Senility			1	1	.02					
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	158	2.65							2.64	.04
379	189Ba	Under observation, undiagnosed and unknown	74	1.24	3	3	.05	3	3	.05	5.03	.08
380	189Bb	Malingering	19	.32							.63	.01
		For diseases not enumerated above	3,645	61.15	89	70	1.16	6	6	.10	113.96	1.91

[1] Including those occurring in the United States proper from commands on duty in Alaska or insular possessions.

ratios per 1,000 of mean strength, for enlisted American troops serving in the United States for the year 1918—Continued.

United States, white, enlisted men. S. G. O., 57912—A. G. O., 58519.										United States, colored, enlisted men. S. G. O., 1696—A. G. O., 1696.									
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
		(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
9	0.16	5	4	0.07	4	4	0.07	2.45	0.04										
3	.05	2	1	.02	1	1	.02	.45	.01										
289	4.83							7.95	.14	24	14.15							0.66	0.39
36	.62	1	1	.02				2.87	.05										
125	2.18	1						6.28	.11										
276	4.77							15.60	.27	3	1.77							.17	.10
576	9.95							6.74	.12	12	7.08							.30	.18
147	2.54							2.27	.04	6	3.54							.06	.04
9	.16	2	2	.03				.80	.01										
1,663	28.72	6	5	.09				33.09	.57	53	31.25							.95	.56
18	.31				3	3	.05	1.47	.03									.17	.10
131	2.26	3	3	.05	18	18	.31	11.12	.19	9	5.31				1	1	0.59	.53	.31
144	2.49	7	6	.10	4	4	.07	8.47	.15	4	2.36							.17	.10
41	.71							.58	.01										
54	.93	4	3	.05				3.55	.06	2	1.18							.15	.09
1	.02							.01	.00	2	1.18							.02	.01
254	4.39	1	1	.02				3.75	.06	10	5.90							.13	.07
42	.73							.98	.02	4	2.36							.06	.04
3,104	53.60	1	1	.02				43.51	.75	70	41.27							.99	.58
10	.17	1	1	.02				1.73	.03										
612	10.57	1	1	.02				12.10	.21	33	19.46							.49	.29
1,566	27.04	2	2	.03	4	4	.07	17.01	.29	42	24.76							.58	.34
80	1.38				1	1	.02	1.48	.03										
58	1.00							1.15	.02										
413	7.13	4	2	.03	8	8	.14	27.65	.48	5	2.95							.30	.18
200	3.45	12	9	.15	4	4	.07	20.95	.36	8	4.72	1	1	0.59				1.03	.61
60	1.04	1	1	.02				3.89	.07										
1,060	18.30	4	3	.05				14.78	.26	12	7.08							.14	.08
11	.19	1	1	.02				.92	.02	1	.59							.06	.03
208	3.59	2	2	.03	2	2	.03	10.19	.18	2	1.18							.13	.08
4	.07				1	1	.02	.36	.01										
18	.31				5	5	.09	.99	.02										
42	.73	14	14	.24	9	9	.15	7.17	.12	3	1.77	3	2	1.18				.60	.35
11	.19	2	2	.03				1.99	.03	1	.59							.02	.01
110	1.90	19	14	.24				6.52	.11	4	2.36							.34	.20
63	1.09	19	14	.24				5.05	.09	1	.59	2						.25	.15
34	.59							.96	.02										
7	.12							.43	.01										
275	4.75							8.37	.14	7	4.13							.18	.11
799	13.80							13.15	.23	13	7.67							.34	.20
525	9.07	2	2	.03				15.05	.26	8	4.72							.24	.14
99	1.71	2	2	.03	1	1	.02	5.42	.09	6	3.54	1	1	.59				.72	.42
212	3.66	13	7	.12				13.63	.24	8	4.72	3	1	.59				1.08	.64
133	2.30	67	54	.92				12.17	.21										
246	4.25	1	1	.02				6.55	.11	7	4.13							.19	.11
		1	1	.02															
144	2.49							2.50	.04	14	8.25							.15	.09
72	1.24	2	2	.03	3	3	.05	4.85	.08	2	1.18	1	1	.59				.18	.10
16	.28							.62	.01	3	1.77							.01	.00
3,554	61.37	86	70	1.20	6	6	.10	109.50	1.89	91	53.66	3						4.46	2.63

[1] Excluding those occurring in the United States proper from commands on duty in Alaska or insular possessions.

TABLE NO. 71.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with continental, excluding Alaska,*

Serial Nos.	International classification.	Causes of admission to sick report.	United States, total enlisted men, white and colored.									
		Mean strength	S. G. O., 59608—A. G. O., 60215.									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[3]										
426–434	155–163	Suicides, all	8	0.13	.....	.....	.....	33	33	0.55	.....	.....
435	164	Poisoning by food	69	1.16	.....	.....	.....	.....	.....	.....	.....	.....
436	165a	Venomous bites and stings	74	1.24	.....	.....	.....	.....	.....	.....	.....	.....
437	165b	Other poisoning (deleterious gases excepted)	29	.49	.....	.....	.....	6	6	.10	.....	.....
438	166	Conflagration	1	.02	.....	.....	.....	.....	.....	.....	.....	.....
439	167	Burns (conflagrations excepted)	237	3.98	2	2	.03	.....	.....	.....	.....	.....
440	168	Absorption of deleterious gases	2	.03	.....	.....	.....	1	1	.02	.....	.....
442	169	Drowning, accidental	.....	.....	.....	.....	.....	18	18	.30	.....	.....
443	170	Traumatism by firearms (other than specified)	142	2.38	20	18	.30	8	8	.13	.....	.....
444	170a	Shot by sentry or guard	2	.03	.....	.....	.....	2	2	.03	.....	.....
445	171	Traumatism by cutting or piercing instruments	644	10.80	6	5	.08	1	1	.02	.....	.....
446	172	Traumatism by fall	2,343	39.31	34	30	.50	14	14	.23	.....	.....
447	173	Traumatism in mines and quarries	1	.02	.....	.....	.....	.....	.....	.....	.....	.....
448	174	Traumatism by machines	78	1.31	4	4	.07	.....	.....	.....	.....	.....
449	175	Traumatism by other crushing	431	7.23	3	3	.05	33	33	.55	.....	.....
450	176	Injuries by animals	811	13.61	9	8	.13	2	2	.03	.....	.....
452	178	Effects of excessive cold	25	.42	3	3	.05	1	1	.02	.....	.....
453	179	Effects of heat	89	1.49	.....	.....	.....	2	1	.02	.....	.....
454	180	Effects of lightning	2	.03	.....	.....	.....	3	3	.05	.....	.....
455	181	Effects of electricity	2	.03	.....	.....	.....	1	1	.02	.....	.....
456–458	182–184	Homicides, all	5	.08	.....	.....	.....	15	15	.25	.....	.....
459	185	Fractures, causes not specified	1	.02	.....	.....	.....	.....	.....	.....	.....	.....
460	186	Other external violence	2,769	46.45	16	11	.18	1	1	.02	.....	.....
425	186	Secondary results of injury	101	1.69	8	7	.12	.....	.....	.....	.....	.....
462–466		Killed or wounded in action	.....	.....	2	1	.02	.....	.....	.....	.....	.....
462		By bullet	.....	.....	2	1	.02	.....	.....	.....	.....	.....
		DISEASES AND INJURIES GROUPED.										
		General diseases	10,636	178.43	351	252	4.18	65	54	.90	522.20	8.76
	1–19	Epidemic diseases	3,839	64.40	5	4	.07	12	12	.20	100.57	1.69
	20–59	Other general diseases	6,797	114.03	346	248	4.12	53	42	.70	421.63	7.07
		Diseases of the nervous system and organs of special sense	1,572	26.37	367	263	4.36	17	17	.28	130.47	2.19
	60–74	Of the nervous system	789	13.24	332	235	3.90	15	15	.25	99.09	1.66
	75	Of the eye and its annexa	474	7.95	23	20	.33	.....	.....	.....	18.68	.31
	76	Of the ear and its annexa	309	5.18	12	8	.13	2	2	.03	12.70	.21
	77–85	Diseases of the circulatory system	921	15.45	47	39	.65	19	19	.32	53.90	.90
	86–98	Diseases of the respiratory system	2,883	48.37	23	20	.33	26	26	.43	71.47	1.20
	99–118	Diseases of the digestive system	7,878	132.16	31	25	.42	24	24	.40	165.14	2.77
	119–127	Diseases of the genito-urinary system	534	8.96	40	32	.53	14	14	.23	28.50	.48
	142–145	Diseases of the skin and cellular tissue	2,763	46.35	9	8	.13	.....	.....	.....	65.18	1.09
	146–149	Diseases of the organs of locomotion	1,368	22.95	98	74	1.23	1	1	0.2	57.09	.96
	150	Malformations, etc	253	4.24	1	1	.02	.....	.....	.....	6.74	.11
	154	Diseases, results of old age	.....	.....	1	1	.02	.....	.....	.....	.....	.....
	189	Ill-defined diseases	277	4.65	3	3	.05	3	3	.05	8.56	.14
		Total for disease	29,085	487.94	971	718	11.92	169	158	2.62	1,109.26	18.61
	155–186	External causes	7,866	131.96	107	92	1.53	141	140	2.33	257.98	4.33
		Total for disease and external causes	36,951	619.90	1,078	810	13.45	310	298	4.95	1,367.24	22.94

[1] Including those occurring in the United States proper from commands on duty in Alaska or insular possessions.

ratios per 1,000 of mean strength, for enlisted American troops serving in the United States, for the year 1913—Continued.

United States, white, enlisted men.									United States, colored, enlisted men.								
S. G. O., 57912—A. G. O., 58519.									S. G. O., 1696—A. G. O., 1696.								
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
		Number.			Number.							Number.			Number.				
Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.	Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.
8	0.14				31	31	0.53								2	2	1.18		
68	1.17									1	0.59								
72	1.24									2	1.18								
29	.50				6	6	.10												
1	.02																		
227	3.92	2	2	0.03						10	5.90								
2	.03				1	1	.02												
					18	18	.31												
135	2.33	19	17	.29	8	8	.14			7	4.13	1	1	0.59					
2	.03				2	2	.03												
626	10.81	6	5	.09	1	1	.02			18	10.61								
2,259	39.01	32	29	.50	14	14	.24			84	49.53	2	1	.59					
1	.02																		
76	1.31	4	4	.07						2	1.18								
424	7.32	2	2	.03	33	33	.56			7	4.13	1	1	.59					
745	12.86	8	7	.12	2	2	.03			66	38.92	1	1	.59					
22	.38	3	3	.05	1	1	.02			3	1.77								
88	1.52				2	1	.02			1	.59								
2	.03				3	3	.05												
2	.03				1	1	.02												
5	.09				13	13	.22								2	2	1.18		
1	.02																		
2,720	46.97	16	11	.19	1	1	.02			49	28.89								
95	1.64	8	7	.12						6	3.54								
		2	1	.02															
		2	1	.02															
10,341	178.56	322	243	4.15	55	52	.89	497.60	8.59	295	173.94	29	9	5.31	10	2	1.18	24.60	14.50
3,751	64.77	5	4	.07	12	12	.21	96.58	1.67	88	51.89							3.99	2.35
6,590	113.79	317	239	4.08	43	40	.68	401.02	6.92	207	122.05	29	9	5.31	10	2	1.18	20.61	12.15
1,516	26.18	353	260	4.44	17	17	.29	124.54	2.15	56	33.02	14	3	1.77				5.93	3.50
755	13.04	319	232	3.96	15	15	.26	94.74	1.64	34	20.05	13	3	1.77				4.35	2.56
458	7.91	22	20	.34				17.68	.31	10	9.43	1						1.00	.59
303	5.23	12	8	.14	2	2	.03	12.11	.21	6	3.54							.59	.35
879	15.18	45	38	.65	18	18	.31	51.67	.89	42	24.76	2	1	.59	1	1	.59	2.23	1.31
2,794	48.25	23	20	.34	25	25	.43	69.10	1.19	89	52.48				1	1	.59	2.37	1.40
7,690	132.79	30	24	.41	24	24	.41	161.12	2.78	188	110.85	1	1	.59				4.02	2.37
519	8.96	35	30	.51	14	14	.24	27.34	.47	15	8.84	5	2	1.18				1.16	.68
2,711	46.81	9	8	.14				63.30	1.09	52	30.66							1.82	1.08
1,325	22.88	94	72	1.23	1	1	.02	54.52	.94	43	25.35	4	2	1.18				2.58	1.52
246	4.25	1	1	.02				6.55	.11	7	4.13							.19	.11
		1	1	.02															
258	4.46	2	2	.03	3	3	.05	8.23	.14	19	11.20	1	1	.59				.33	.19
28,279	488.31	915	699	11.94	157	154	2.63	1,064.03	18.37	806	475.24	56	19	11.20	12	4	2.36	45.23	26.67
7,610	131.41	102	88	1.50	137	136	2.32	249.14	4.30	256	150.94	5	4	2.36	4	4	2.36	8.84	5.21
35,889	619.72	1,017	787	13.45	294	290	4.96	1,313.17	22.68	1,062	626.18	61	23	13.56	16	8	4.72	54.08	31.88

[2] Excluding those occurring in the United States proper from commands on duty in Alaska or insular possessions.

[3] Noneffectiveness for individual external causes not tabulated.

TABLE NO. 72.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with year*

Serial Nos.	International classification.	Causes of admission to sick report.	Philippine Islands, total, American, enlisted men, white and colored.								
		Mean strength	S. G. O., 11188—A. G. O., 11383.								
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)			
2	1a	Paratyphoid fever	1	0.09							0.09	0.01
7–11	4	Malaria	1,254	112.08				2	2	0.18	25.81	2.31
7		Estivo-autumnal fever	281	25.12				2	2	.18	8.11	.72
8		Malarial cachexia	15	1.34							1.12	.10
9		Quartan malarial fever	12	1.07							.25	.02
10		Tertian malarial fever	880	78.65							15.29	1.37
11		Undetermined malarial fever	66	5.90							1.04	.09
13	5b	Vaccinia									.02	.00
14	6	Measles	5	.45							.17	.01
18	10	Influenza	16	1.43							.22	.02
19	12	Asiatic cholera	1	.09				1	1	.09	.01	.00
21–23	14	Dysentery	233	20.83		1	0.09	6	6	.53	13.84	1.24
21		Bacillary	9	.80							.70	.06
22		Entamebic	189	16.89		1	.09	6	6	.53	12.14	1.08
23		Unclassified	35	3.13							1.00	.09
29	19b	Dengue	439	39.24							6.29	.56
31	19d	German measles	19	1.70							.55	.05
34	19g	Mumps	51	4.56							3.67	.33
37	20	Purulent infection and septicemia	1	.09				1	1	.09	.11	.01
42–46	25	Mycoses	2	.18							.47	.04
49–57	28–34	Tuberculosis, all	75	6.70		45	3.95	3	9	.79	6.21	.56
49–51	28	Tuberculosis of lungs	69	6.17		42	3.69	1	6	.53	5.36	.48
52	29	Miliary tuberculosis, acute	2	.18				2	2	.18	.25	.02
53–57	30–34	Tuberculosis of other organs	4	.36		3	.26		1	.09	.59	.05
59–74	37–38	Venereal diseases, all	1,672	149.45		24	2.11				99.78	8.92
59–64	37	Syphilis	371	33.16		6	.53				22.03	1.97
65–67	38a	Soft chancre	326	29.14		1	.09				16.43	1.47
68–74	38b	Gonococcus infection	975	87.14		17	1.49				61.31	5.48
80	46	Benign tumors	7	.63		1	.09				.35	.03
81–85	47–48	Rheumatism, articular, all	56	5.01		2	.18				5.03	.45
81–82	47	Acute articular rheumatism	36	3.22							1.81	.16
83–85	48	Chronic articular rheumatism	20	1.79		2	.18				3.22	.29
87–88	50	Diabetes	1	.09		1	.09				.25	.02
89	51	Exophthalmic goitre	2	.18		1	.09				.48	.04
97–100	56	Alcoholism and results	228	20.38		5	.44				3.83	.34
101–102	57–58	Chronic occupational poisoning	1	.09							.33	.03
103–104	59	Other chronic poisoning, including drug habit	2	.18		1	.09				.05	.00
109	62	Locomotor ataxia				1	.09					
110–115	63	Other diseases of spinal cord	1	.09		1	.09				.24	.02
117–119	66	Paralysis without specified cause	1	.09							.19	.02
120–126	67–68	Mental alienation	54	4.83		41	3.60				5.04	.45
127	69	Epilepsy	17	1.52		5	.44				1.53	.14
129–133	73	Neuralgia and neuritis	62	5.54		5	.44				2.95	.26
138–141	75a	Conjunctivitis	46	4.11							.71	.06
142	75b	Trachoma	1	.09							.03	.00
166	77	Pericarditis									.12	.01
169–174	79	Organic heart disease	9	.80				2	2	.18	.59	.05
175	80	Angina pectoris	2	.18							.04	.00
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc	2	.18				1	1	.09	.20	.02
178–179	82	Embolism and thrombosis	2	.18	1	.09		1	1	.09	.24	.02
181	83b	Hemorrhoids	86	7.69							2.36	.21
183	83d	Varicose veins	20	1.79							1.21	.11
184	83e	Varicocele	52	4.65	1	.09					2.99	.27
185–187	84	Diseases of the lymphatic system	105	9.38							4.99	.45
193–199	86	Diseases of the nasal fossae	130	11.62							1.77	.16
200–202	87	Diseases of the larynx	24	2.15							.54	.05
203–204	88	Diseases of the thyroid body	1	.09							.12	.01
205–206	89–90	Bronchitis	313	27.97	1	.09					7.77	.69
207	91	Broncho-pneumonia	2	.18							.12	.01
208	92	Pneumonia	15	1.34				2	2	.18	1.11	.10

[1] Number of discharges and deaths which actually occurred.

ratios per 1,000 of mean strength, for Philippine Islands, American troops, enlisted men, 1913.

Philippine Islands, white, American, enlisted men.									Philippine Islands, colored, American, enlisted men.							
S. G. O., 9377—A. G. O., 9572.									S. G. O., 1811—A. G. O., 1811.							
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
		(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
1	0.11							0.09	0.01										
1,184	126.27				2	2	0.21	24.33	2.60	70	38.65							1.47	0.81
260	27.73				2	2	.21	7.53	.80	21	11.60							.58	.32
15	1.60							1.12	.12										
11	1.17							.24	.03	1	.55							.02	.01
839	89.47							14.50	1.55	41	22.64							.79	.44
59	6.29							.95	.10	7	3.87							.09	.05
								.02	.00										
5	.53							.17	.02										
16	1.71							.22	.02										
1	.11				1	1	.10	.01	.00										
224	23.89	1	0.10		6	6	.63	13.47	1.44	9	4.97							.37	.20
8	.85							.68	.07	1	.55							.02	.01
183	19.51	1	.10		6	6	.63	11.80	1.26	6	3.31							.33	.18
33	3.52							.98	.10	2	1.10							.02	.01
215	22.93							3.07	.33	224	123.69							3.22	1.78
19	2.03							.55	.06										
44	4.69							3.24	.35	7	3.87							.43	.24
1	.11				1	1	.10	.11	.01										
2	.21							.47	.05										
59	6.29	33	3.45		1	3	.31	4.91	.52	16	8.83	12	6.63		2	6	3.31	1.30	.72
56	5.97	30	3.13		1	2	.21	4.36	.47	13	7.18	12	6.63		4	2	.21	1.00	.55
										2	1.10				2	2	1.10	.25	.14
3	.32	3	.31			1	.10	.55	.06	1	.55							.04	.02
1,320	140.77	19	1.98					75.58	8.06	352	194.37	5	2.76					24.19	13.36
303	32.31	5	.52					17.74	1.89	68	37.55	1	.55					4.29	2.37
232	24.74							10.73	1.14	94	51.90	1	.55					5.70	3.15
785	83.71	14	1.46					47.11	5.02	190	104.92	3	1.66					14.20	7.84
6	.64	1	.10					.35	.04	1	.55							.01	.00
44	4.69	1	.10					3.04	.32	12	6.63	1	.55					1.99	1.10
32	3.41							1.45	.15	4	2.21							.36	.20
12	1.28	1	.10					1.59	.17	8	4.42	1	.55					1.63	.90
1	.11	1	.10					.25	.03										
2	.21	1	.10					.48	.05										
209	22.29	5	.52					3.15	.34	19	10.49							.68	.38
1	.11							.33	.04										
2	.21	1	.10					.05	.01										
		1	.10																
1	.11	1	.10					.24	.03										
1	.11							.19	.02										
48	5.12	37	3.87					4.23	.45	6	3.31	4	2.21					.81	.45
17	1.81	5	.52					1.53	.16										
48	5.12	3	.31					2.24	.24	14	7.73	2	1.10					.71	.39
39	4.16							.62	.07	7	3.87							.09	.05
1	.11							.03	.00										
7	.75				1	1	.10	.12	.01										
2	.21							.52	.05	2	1.10				1	1	.55	.07	.04
								.04	.00										
2	.21				1	1	.10	.20	.02										
2	.21	1	.10		1	1	.10	.24	.03										
69	7.36							2.03	.22	17	9.39							.33	.18
20	2.13							1.21	.13										
49	5.23	1	.10					2.79	.30	3	1.66							.20	.11
89	9.49							3.77	.40	16	8.83							1.21	.67
111	11.84							1.64	.18	19	10.49							.13	.07
14	1.49							.27	.03	10	5.52							.27	.15
1	.11							.12	.01										
267	28.47	1	.10					6.88	.73	46	25.40							.88	.49
2	.21							.12	.01										
10	1.07				1	1	.10	.77	.08	5	2.76				1	1	.55	.34	.19

[1] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

TABLE No. 72.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with year*

Serial Nos.	International classification.	Causes of admission to sick report.	Philippine Islands, total, American, enlisted men, white and colored.									
		Mean strength	S. G. O., 11188—A. G. O., 11383.									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
209–215	93	Pleurisy	31	2.77							2.30	0.21
219	96	Asthma	13	1.16		1	0.09				.49	.04
220	97	Pulmonary emphysema	1	.09							.02	.00
221	98a	Haemoptysis	1	.09							.02	.00
222	98b	Hay fever									.01	.00
224–227	99a	Diseases of the teeth and gums	50	4.47							1.32	.12
228–231	99b	Other diseases of the mouth and annexa	13	1.16							.33	.03
232–236	100	Diseases of the pharynx	393	35.12							6.12	.55
238	102	Ulcer of the stomach	3	.27							.68	.06
239–244	103	Other diseases of stomach (cancer excepted)	195	17.43							3.39	.30
245–253	105	Diarrhea and enteritis	755	67.48							12.71	1.14
254	106	Ankylostomiasis	12	1.07							.62	.06
255–259	107	Intestinal parasites	32	2.86							.74	.07
260	108	Appendicitis	66	5.90							5.49	.49
261–263	109	Hernia	50	4.47		1	.09				6.49	.58
264–267	110a	Diseases of the anus and fecal fistula	9	.80							.54	.05
268–272	110b	Other diseases of the intestines	459	41.02		1	.09				6.53	.58
276	114	Biliary calculi	3	.27							.10	.01
277–281	115	Other diseases of liver and gall bladder	60	5.36				2	2	0.18	2.52	.23
283–284	117	Simple peritonitis	1	.09				1	1	.09	.01	.00
288	119	Acute nephritis	1	.09							.04	.00
289–291	120	Bright's disease	3	.27				1	1	.09	.29	.03
293–299	122	Other diseases of the kidney and annexa	4	.36							.37	.03
303–306	124	Diseases of the bladder	17	1.52		2	.18				1.02	.09
304	124b	Enuresis	5	.45		2	.18				.11	.01
307–309	125	Diseases of the urethra, urinary abscess, etc	10	.89							.13	.01
310–312	126	Diseases of the prostate	1	.09							.17	.02
313–319	127	Diseases of the male genital organs (nonvenereal)	38	3.40							1.50	.13
322–323	143	Furuncle and carbuncle	274	24.49							5.25	.47
324–325	144	Acute abscess and cellulitis	181	16.18							5.79	.52
352–357	146	Diseases of the bones	17	1.52							1.17	.10
358–360	147	Diseases of the joints	24	2.15		2	.18				2.05	.18
367	149g	Flat foot	4	.36							.21	.02
372	150	Congenital malformations	29	2.59							.90	.08
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	59	5.27							.82	.07
379	189Ba	Under observation, undiagnosed and unknown	15	1.34							.53	.05
380	189Bb	Malingering	4	.36							.07	.01
		For diseases not mentioned above	846	75.62		9	.79				27.09	2.42
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[2]										
426–434	155–163	Suicides, all	1	.09				3	3	.26		
435	164	Poisoning by food	169	15.10								
436	165a	Venomous bites and stings	25	2.23								
437	165b	Other poisoning (deleterious gases excepted)	7	.63								
439	167	Burns (conflagrations excepted)	53	4.74				1	1	.09		
440	168	Absorption of deleterious gases	1	.09								
442	169	Drowning, accidental						2	2	.18		

[1] Number of discharges and deaths which actually occurred.
[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

Ratios per 1,000 of mean strength, for Philippine Islands, American troops, enlisted men, 1913—Continued.

Philippine Islands, white, American, enlisted men.										Philippine Islands, colored, American, enlisted men.									
S. G. O., 9377—A. G. O., 9572.										S. G. O., 1811—A. G. O., 1811.									
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
		(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
30	3.20							2.22	0.24	1	0.55							0.08	0.04
10	1.07		1	0.10				.41	.04	3	1.66							.08	.05
1	.11							.02	.00										
1	.11							.02	.00										
								.01	.00										
45	4.80							1.15	.12	5	2.76							.17	.09
10	1.07							.30	.03	3	1.66							.04	.02
323	34.44							5.05	.54	70	38.65							1.08	.59
3	.32							.54	.06									.14	.08
170	18.13							3.14	.34	25	13.80							.25	.14
678	72.30							11.76	1.25	77	42.52							.95	.52
12	1.28							.62	.07										
29	3.09							.68	.07	3	1.66							.05	.03
65	6.93							5.44	.58	1	.55							.05	.03
45	4.80		1	.10				5.89	.63	5	2.76							.59	.33
7	.75							.49	.05	2	1.10							.04	.02
370	39.45		1	.10				5.32	.57	89	49.14							1.21	.67
2	.21							.05	.01	1	.55							.05	.03
59	6.29				1	1	0.10	2.44	.26	1	.55				1	1	0.55	.08	.04
1	.11				1	1	.10	.01	.00										
1	.11							.04	.00										
3	.32				1	1	.10	.29	.03										
4	.43							.37	.04										
15	1.60		2	.21				.97	.10	2	1.10							.05	.03
5	.53		2	.21				.11	.01										
7	.75							.10	.01	3	1.66							.03	.01
1	.11							.17	.02										
31	3.31							1.30	.14	7	3.87							.20	.11
243	25.91							4.71	.50	31	17.12							.53	.30
169	18.02							5.54	.59	12	6.63							.25	.14
17	1.81							.95	.10									.22	.12
23	2.45		1	.10				2.04	.22	1	.55		1	0.55				.01	.01
3	.32							.20	.02	1	.55							.01	.00
24	2.56							.76	.08	5	2.76							.15	.08
42	4.48							.66	.07	17	9.39							.16	.09
14	1.49							.50	.05	1	.55							.03	.02
1	.11							.01	.00	3	1.66							.06	.03
741	79.02		8	.84				24.87	2.65	105	57.98		1	.55				2.22	1.23
					2	2	.21			1	.55				1	1	.55		
166	17.70									3	1.66								
18	1.92									7	3.87								
6	.64									1	.55								
50	5.33				1	1	.10			3	1.66								
1	.11																		
					2	2	.21												

[3] Noneffectiveness for individual external causes not tabulated.

TABLE No. 72.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with year*

Serial Nos.	International classification.	Causes of admission to sick report.	Philippine Islands, total, American, enlisted men, white and colored.								
		Mean strength	S. G. O., 59608—A. G. O., 60215.								
			Admissions.		Discharges.		Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)			
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES—continued.										
443	170	Traumatism by firearms (other than specified)	16	1.43								
444	170a	Shot by sentry or guard	3	.27								
445	171	Traumatism by cutting or piercing instruments	144	12.87								
446	172	Traumatism by fall	395	35.30		3	0.26					
448	174	Traumatism by machines	9	.80								
449	175	Traumatism by other crushing	103	9.21				9	9	0.79		
450	176	Injuries by animals	100	8.94		1	.09					
453	179	Effects of heat	32	2.86					1	.09		
456–458	182–4	Homicides, all						2	2	.18		
460	186	Other external violence	546	48.80		2	.18	3	3	.26		
425	186	Secondary results of injury	16	1.43		1	.09					
462–466		Killed or wounded in action	10	.89		1	.09	3	3	.26		
462		By bullet	4	.36		1	.09	2	2	.18		
465		By bolo, kris, etc	5	.45				1	1	.09		
466		By other weapon	1	.09								
		DISEASES AND INJURIES GROUPED.										
		General diseases	4,082	364.85		81	7.12	13	19	1.67	168.66	15.07
	1–19	Epidemic diseases	2,027	181.18		1	.09	9	9	.79	51.01	4.56
	20–59	Other general diseases	2,055	183.68		80	7.03	4	10	.88	117.65	10.52
		Diseases of the nervous system and organs of special sense	386	34.50		59	5.19				18.70	1.67
	60–74	Of the nervous system	192	17.16		58	5.10				13.26	1.19
	75	Of the eye and its annexa	100	8.94							3.16	.28
	76	Of the ear and its annexa	94	8.40		1	.09				2.28	.20
	77–85	Diseases of the circulatory system	288	25.74		2	.18	4	4	.35	12.93	1.16
	86–98	Diseases of the respiratory system	533	47.64		2	.18	2	2	.18	14.29	1.28
	99–118	Diseases of the digestive system	2,103	187.96		2	.18	3	3	.26	47.67	4.26
	119–127	Diseases of the genito-urinary system	84	7.51		2	.18	1	1	.09	4.02	.36
	142–145	Diseases of the skin and cellular tissue	850	75.97		1	.09				21.40	1.91
	146–149	Diseases of the organs of locomotion	251	22.43		4	.35				10.23	.91
	150	Malformations, etc	29	2.59							.90	.08
	189	Ill-defined diseases	79	7.06							1.42	.13
		Total for disease	8,685	776.28		153	13.44	23	29	2.55	300.23	26.84
	155–186	External causes	1,631	145.78		8	.70	23	24	2.11	45.63	4.08
		Total for disease and external causes	10,316	922.06		161	14.14	46	53	4.66	345.87	30.91

[1] Number of discharges and deaths which actually occurred.

ratios per 1,000 of mean strength, for Philippine Islands, American troops, enlisted men, 1913—Continued.

Philippine Islands, white, American, enlisted men.										Philippine Islands, colored, American, enlisted men.									
S. G. O., 57912—A. G. O., 58519.										S. G. O., 1696—A. G. O., 1696.									
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
		Number.			Number.							Number.			Number.				
Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.	Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.
14	1.49									2	1.10								
3	.32																		
118	12.58									26	14.36								
332	35.40		2	0.21						63	34.79		1	0.55					
9	.96																		
96	10.23				9	9	0.94			7	3.87								
98	10.45		1	.10						2	1.10								
25	2.67					1	.10			7	3.87								
					2	2	.21												
457	48.74		2	.21	3	3	.31			89	49.14								
14	1.49		1	.10						2	1.10								
10	1.07		1	.10	3	3	.31												
4	.43		1	.10	2	2	.21												
5	.53				1	1	.10												
1	.11																		
3,368	359.18		63	6.58	11	13	1.36	134.82	14.38	714	394.26		18	9.94	2	6	3.31	33.83	18.68
1,713	182.68		1	.10	9	9	.94	45.35	4.84	314	173.38							5.66	3.12
1,655	176.50		62	6.48	2	4	.42	89.48	9.54	400	220.87		18	9.94	2	6	3.31	28.17	15.55
342	36.47		52	5.43				16.29	1.73	44	24.29		7	3.87				2.41	1.32
168	17.92		51	5.33				11.48	1.22	24	13.25		7	3.87				1.78	.98
86	9.17							2.73	.29	14	7.73							.42	.23
88	9.38		1	.10				2.08	.22	6	3.31							.20	.11
250	26.66		2	.21	3	3	.31	11.12	1.19	38	20.98				1	1	.55	1.81	1.00
449	47.88		2	.21	1	1	.10	12.50	1.33	84	46.38				1	1	.55	1.78	.98
1,821	194.20		2	.21	2	2	.21	42.98	4.58	282	155.71				1	1	.55	4.69	2.59
72	7.68		2	.21	1	1	.10	3.76	.40	12	6.63							.27	.15
763	81.37		1	.10				19.82	2.11	87	48.04							1.58	.87
209	22.29		3	.31				9.53	1.02	42	23.19		1	.55				.70	.39
24	2.56							.76	.08	5	2.76							.15	.08
58	6.19							1.17	.12	21	11.60							.25	.14
7,356	784.47		127	13.27	18	20	2.09	252.76	26.95	1,329	733.85		26	14.36	5	9	4.97	47.47	26.21
1,418	151.22		7	.73	22	23	2.40	41.25	4.40	213	117.61		1	.55	1	1	.55	4.38	2.42
8,774	935.69		134	14.00	40	43	4.49	294.01	31.35	1,542	851.46		27	14.91	6	10	5.52	51.85	28.63

[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

TABLE No. 73.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with Canal Zone, and*

Serial Nos.	International classification.	Causes of admission to sick report.	Alaska (enlisted men).									
		Mean strength	1,141.									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)			
1	1	Typhoid fever										
2	1a	Paratyphoid fever										
5	2	Typhus fever										
7-11	4	Malaria	2	1.75							0.03	0.03
7		Æstivo-autumnal fever										
10		Tertian malarial fever	2	1.75							.03	.03
12	5	Smallpox and varioloid										
13	5b	Vaccinia										
15	7	Scarlet fever										
17	9	Diphtheria	1	.88							.03	.03
18	10	Influenza	42	36.81							.48	.42
21-23	14	Dysentery	1	.88							.02	.01
21		Bacillary										
22		Entamebic	1	.88							.02	.01
27	18	Erysipelas									.02	.01
34	19g	Mumps	2	1.75							.10	.09
49-57	28-34	Tuberculosis, all	2	1.75		2	1.75				.60	.53
49-51	28	Tuberculosis of lungs	2	1.75		2	1.75				.38	.33
52	29	Miliary tuberculosis, acute										
53-57	30-34	Tuberculosis of other organs									.22	.19
59-74	37-38	Venereal diseases, all	29	25.42							.87	.76
59-64	37	Syphilis	11	9.64							.40	.35
65-67	38a	Soft chancre	2	1.75							.02	02
68-74	38b	Gonococcus infection	16	14.02							.44	.39
80	46	Benign tumors	5	4.38							.07	.06
81-85	47-48	Rheumatism, articular, all	12	10.52							.62	.54
81-82	47	Acute articular rheumatism	7	6.13							.19	.17
83-85	48	Chronic articular rheumatism	5	4.38							.42	.37
87-88	50	Diabetes										
97-100	56	Alcoholism and results	25	21.91							.17	.15
103-104	59	Other chronic poisoning, including drug habit	1	.88							.02	.02
110-115	63	Other diseases of spinal cord										
117-119	66	Paralysis without specified cause										
120-126	67-68	Mental alienation	6	5.26		6	5.26				1.08	.95
129-133	73	Neuralgia and neuritis	6	5.26		1	.88				.24	.21
138-141	75a	Conjunctivitis	1	.88							.15	.13
169-174	79	Organic heart disease										
181	83b	Hemorrhoids	8	7.01							.22	.20
183	83d	Varicose veins	2	1.75							.11	.10
184	83e	Varicocele	1	.88							.05	.04
185-187	84	Diseases of the lymphatic system	2	1.75							.14	.12
193-199	86	Diseases of the nasal fossæ	7	6.13							.05	.05
200-202	87	Diseases of the larynx	3	2.63							.03	.03
203-204	88	Diseases of the thyroid body										
205-206	89-90	Bronchitis	31	27.17							.53	.47
207	91	Bronchopneumonia									.02	.02
208	92	Pneumonia	3	2.63							.14	.12
209-215	93	Pleurisy	2	1.75							.03	.03
219	96	Asthma										
221	98a	Hæmoptysis	1	.88							.05	.04
224-227	99a	Diseases of the teeth and gums	15	13.15							.15	.13
228-231	99b	Other diseases of the mouth and annexa	2	1.75							.17	.15
232-236	100	Diseases of the pharynx	32	28.05							.41	.36
238	102	Ulcer of stomach	1	.88							.11	.09
239-244	103	Other diseases of stomach (cancer excepted)	24	21.03							.32	.28
245-253	105	Diarrhea and enteritis	13	11.39							.10	.09
255-259	107	Intestinal parasites	1	.88							.01	.01
260	108	Appendicitis	13	11.39							.96	.84
261-263	109	Hernia	2	1.75							.19	.17
264-267	110a	Diseases of the anus and fæcal fistula										

[1] Number of discharges and deaths which actually occurred.

ratios per 1,000 of mean strength, for enlisted American troops serving in Alaska, Panama China, year 1913.

Panama Canal Zone (enlisted men).									China (enlisted men).									
797.									1,216.									
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
		(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
										1	0.82							0.19	0.16
1	1.25							0.10	0.12										
										3	2.47							.52	.43
116	145.55							4.24	5.31	16	13.16							.30	.24
88	110.41							3.45	4.33	1	.82							.05	.04
28	35.13							.78	.98	15	12.34							.25	.21
										6	4.93				2	2	1.64	.44	.36
										1	.82							.07	.06
1	1.25							.07	.09										
										2	1.64							.05	.05
26	32.62							.44	.56	70	57.57							1.03	.85
3	3.76							.12	.15	1	.82							.17	.14
2	2.51							.11	.14										
1	1.25							.01	.01	1	.82							.17	.14
										30	24.67							1.04	.86
3	3.76		2	2.51				.54	.68	4	3.29				1	1	.82	.71	.58
3	3.76		2	2.51				.54	.68	3	2.47							.63	.52
										1	.82				1	1	.82	.08	.06
157	196.99	1	1	1.25				4.31	5.41	275	226.15		1	0.82				11.28	9.28
20	25.09	1	1	1.25				1.19	1.50	68	51.81							3.44	2.83
74	92.85							1.36	1.71	118	97.04							4.75	3.91
63	79.05							1.75	2.20	94	77.30		1	.82				3.10	2.55
1	1.25							.01	.01										
4	5.02							.04	.05	8	6.58							.56	.46
3	3.76							.04	.04	7	5.76							.30	.25
1	1.25							.01	.01	1	.82							.26	.21
1	1.25		1	1.25				.03	.03										
9	11.29							.08	.10	30	24.67		1	.82				.30	.25
										1	.82							.01	.01
1	1.25		1	1.25				.05	.06										
										2	1.64							.07	.06
3	3.76	3	3	3.76				.64	.80	8	6.58		3	2.47				.97	.80
7	8.76		1	1.25				.12	.15	10	8.22							.11	.09
1	1.25							.01	.01	1	.82							.01	.01
3	3.76		2	2.51				.21	.27										
5	6.27							.24	.30	8	6.58							.17	.14
2	2.51							.09	.12	3	2.47							.10	.08
17	21.33							1.36	1.71	23	18.91							.91	.75
13	16.31							.25	.31	3	2.47							.06	.05
										6	4.93							.03	.02
2	2.51							.19	.24										
16	20.08							.44	.55	27	22.20							.34	.28
1	1.25							.01	.02										
										11	9.05				2	2	1.64	1.28	1.05
3	3.76							.09	.12	20	16.45							.82	.67
										1	.82							.01	.01
3	3.76							.04	.05	5	4.11							.05	.04
1	1.25							.03	.03										
31	38.90							.77	.97	44	36.18							.54	.45
5	6.27							.11	.14	12	9.87							.20	.16
4	5.02							.08	.10	52	42.76							.43	.35
										2	1.64							.01	.01
18	22.58		1	1.25	1	1	1.25	1.27	1.59	5	4.11		1	.82				.73	.60
4	5.02							.34	.43	5	4.11							.44	.36
1	1.25							.10	.13	2	1.64							.03	.03

[1] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

TABLE No. 73.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with Canal Zone, and*

Serial Nos.	International classification.	Causes of admission to sick report.	Alaska (enlisted men). Mean strength 1,141. Admissions. Number.	Admissions. Ratio.	Discharges. Number. (1)	Discharges. Number. (2)	Discharges. Ratio.	Deaths. Number. (1)	Deaths. Number. (2)	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
268-272	110b	Other diseases of the intestines	6	5.26							0.07	0.06
275	113	Cirrhosis of liver	1	.88							.07	.06
276	114	Biliary calculi										
277-281	115	Other diseases of liver and gall bladder	2	1.75							.02	.01
283-284	117	Simple peritonitis										
288	119	Acute nephritis	1	.88				1	1	0.88	.04	.04
289-291	120	Bright's disease										
303-306	124	Diseases of the bladder	2	1.75							.06	.06
304	124b	Enuresis	1	.88							.04	.04
310-312	126	Diseases of the prostate	1	.88							.06	.05
313-319	127	Diseases of the male genital organs (nonvenereal)	2	1.75							.02	.02
322-323	143	Furuncle and carbuncle	8	7.01							.08	.07
324-325	144	Acute abscess and cellulitis	4	3.51							.05	.04
352-357	146	Diseases of the bones	1	.88							.09	.08
358-360	147	Diseases of the joints	2	1.75							.01	.01
367	149g	Flat foot										
372	150	Congenital malformations	6	5.26							.12	.10
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	3	2.63							.05	.05
379	189Ba	Under observation, undiagnosed and unknown	1	.88				1	1	.88	.05	.05
380	189Bb	Malingering										
		For disease not mentioned above.	66	57.84		1	0.88				1.35	1.18
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[2]										
426-434	155-163	Su cides, all						1	1	.88		
435	164	Poisoning by food										
436	165a	Venomous bites and stings	1	0.88								
439	167	Burns (conflagrations excepted)	10	8.76								
442	169	Drowning, accidental						1	1	.88		
443	170	Traumatism by firearms (other than specified)	1	.88				1	1	.88		
444	170a	Shot by sentry or guard										
445	171	Traumatism by cutting or piercing instruments	16	14.02								
446	172	Traumatism by fall	61	53.46								
448	174	Traumatism by machines	2	1.75								
449	175	Traumatism by other crushing	5	4.38								
450	176	Injuries by animals	5	4.38								
452	178	Effects of excessive cold	3	2.63								
453	179	Effects of heat										
460	186	Other external violence	55	48.20		1	.88					
425	186	Secondary results of injuries	2	1.75							.08	.07
		DISEASES AND INJURIES GROUPED.										
		General diseases	122	106.92		2	1.75				3.01	2.63
	1-19	Epidemic diseases	48	42.07							.67	.59
	20-59	Other general diseases	74	64.86		2	1.75				2.34	2.05
		Diseases of the nervous system and organs of special sense	22	19.28		8	7.01				2.07	1.81
	60-74	Of the nervous system	14	12.27		7	6.13				1.42	1.25
	75	Of the eye and its annexa	4	3.51							.41	.36
	76	Of the ear and its annexa	4	3.51		1	.88				.24	.21
	77-85	Diseases of the circulatory system	14	12.27							.54	.47
	86-98	Diseases of the respiratory system	47	41.19							.85	.75

[1] Number of discharges and deaths which actually occurred.
[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

ratios per 1,000 of mean strength, for enlisted American troops serving in Alaska, Panama China, year 1913—Continued.

Panama Canal Zone (enlisted men).									China (enlisted men).							
797.									1,216.							
Admissions.		Discharges.			Deaths.			Noneffective.	Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.	Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
2	2.51							0.01	0.01	70	57.57							0.57	0.47
										1	.82							.08	.07
										1	.82							.01	.01
2	2.51							.41	.52	10	8.22							.59	.49
										1	.82							.55	.45
										1	.82							.11	.09
3	3.76		2	2.5				.05	.06										
2	2.51		2	2.51															
6	7.53							.19	.24	13	10.69							.40	.33
19	23.84							.29	.36	19	15.62							.27	.23
9	11.29							.21	.26	19	15.62							.32	.27
2	2.51							.17	.21	1	.82							.01	.00
9	11.29		3	3.76				.50	.62	4	3.29							.18	.15
10	12.55		9	11.29				.42	.52										
1	1.25							.13	.16	5	4.11							.07	.05
2	2.51							.05	.07	1	.82							.01	.00
1	1.25							.01	.01										
65	81.56		3	3.76				2.33	2.92	74	60.86							1.62	1.33
															4	4	3.29		
										2	1.64								
2	2.51									7	5.76								
					4		5.02												
5	6.27		1	1.25						2	1.64								
1	1.25																		
21	26.35									16	13.16								
24	30.11		1	1.25						81	66.61				2	2	1.64		
2	2.51									3	2.47								
2	2.51									7	5.76								
3	3.76																		
26	32.62									71	58.39								
										1	.82							.01	.00
324	406.52	1	4	5.02				10.05	12.61	452	371.71		2	1.64	3	3	2.47	16.72	13.75
147	184.44							4.97	6.24	131	107.73				2	2	1.64	3.83	3.15
177	222.08	1	4	5.02				5.08	6.37	321	263.98		2	1.64	1	1	.82	12.89	10.60
36	45.17	3	8	10.04				1.86	2.33	32	26.32		3	2.47				1.48	1.22
16	20.08	3	6	7.53				.96	1.20	21	17.27		3	2.47				1.19	.98
11	13.80		1	1.25				.72	.90	3	2.47							.22	.18
9	11.29		1	1.25				.18	.23	8	6.58							.07	.06
28	35.13		2	2.51				1.91	2.39	34	27.96							1.18	.97
35	43.91							.98	1.23	68	55.92				2	2	1.64	2.53	2.08

[2] Noneffectiveness for individual external causes not tabulated.

TABLE No. 73.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with Canal Zone, and*

Serial Nos.	International classification.	Causes of admission to sick report.	Alaska (enlisted men).									
		Mean strength	1,141									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)			
		DISEASES AND INJURIES GROUPED—contd.										
	99–118	Diseases of the digestive system	112	98.16	.....	...	.....	...	...	....	2.58	2.26
	119–127	Diseases of the genito-urinary system	6	5.26	.....	...	.....	1	1	.88	.19	.16
	142–145	Diseases of the skin and cellular tissue	30	26.29	.....	...	.....	...	...	....	.34	.30
	146–149	Diseases of the organs of locomotion	36	31.55	.....	...	.....	...	...	....	.59	.51
	150	Malformations, etc	6	5.26	.....	...	.....	...	...	....	.12	.10
	189	Ill-defined diseases	9	7.89	.....	...	.....	1	1	.88	.14	.12
		Total for disease	404	354.08	.....	10	8.76	2	2	1.75	10.41	9.13
	155–186	External causes	161	141.10	.....	1	.88	3	3	2.63	5.13	4.49
		Total for disease and external causes	565	495.18	.....	11	9.64	5	5	4.38	15.54	13.62

(1) Number of discharges and deaths which actually occurred.

ratios per 1,000 of mean strength, for enlisted American troops serving in Alaska, Panama China, year 1913—Continued.

Panama Canal Zone (enlisted men).									China (enlisted men).								
797									1,216								
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
		(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
71	89.08	.....	1	1.25	1	1	1.25	3.17	3.98	210	172.70	...	1	0.82	...	...	.....	4.25	3.50
9	11.29	.....	2	2.51	...	...	.....	.24	.30	15	12.34	...	...	.....	...	...	.....	.54	.44
55	69.01	.....	...	.....	...	...	.....	1.34	1.68	68	55.92	...	...	.....	...	...	.....	1.13	.93
31	38.90	.....	12	15.06	...	...	.....	1.47	1.84	33	27.14	...	...	.....	...	...	.....	.88	.73
1	1.25	.....	...	.....	...	...	.....	.13	.16	5	4.11	...	...	.....	...	...	.....	.07	.05
4	5.02	.....	...	.....	...	...	.....	.07	.08	1	.82	...	...	.....	...	...	.....	.01	.00
594	745.29	4	29	36.39	1	1	1.25	21.21	26.61	918	754.93	...	6	4.93	5	5	4.11	28.79	23.68
86	107.90	.....	2	2.51	4	4	5.02	2.88	3.61	190	156.25	...	...	.....	6	6	4.93	3.92	3.23
680	853.20	4	31	38.90	5	5	6.27	24.09	30.23	1,108	911.18	...	6	4.93	11	11	9.05	32.72	26.91

Number of discharges and deaths including those of cases invalided home and deducted from the United States.

TABLE No. 74.—*Admissions to sick report, discharges, deaths, and noneffectiveness*
yea

Serial Nos.	International classification.	Causes of admission to sick report.	Hawaii, total enlisted men, white and colored. Mean strength..... S. G. O., 6130—A. G. O., 6259.									
			Admissions.		Discharges.		Deaths.			Noneffective.	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
7–11	4	Malaria	52	8.48							0.99	0.1
10	.....	Tertian malarial fever	43	7.01							.68	.1
11	.....	Undetermined malarial fever	9	1.47							.32	.0
14	6	Measles	56	9.14							3.66	.6
17	9	Diphtheria	2	.33							.10	.0
18	10	Influenza	160	26.10							2.67	.4
21–23	14	Dysentery	3	.49							.22	.0
22	.....	Entamebic	3	.49							.22	.0
34	19g	Mumps	39	6.36							2.08	.3
49–57	28–34	Tuberculosis, all	26	4.24	6	0.96		5	0.80		1.94	.3
49–51	28	Tuberculosis of lungs	24	3.92	6	.96		5	.80		1.75	.2
53–57	30–34	Tuberculosis of other organs	2	.33							.19	.0
59–74	37–38	Venereal diseases, all	562	91.68	5	.80		1	1	.16	30.87	5.0
59–64	37	Syphilis	155	25.29	4	.64		1	1	.16	10.34	1.6
65–67	38a	Soft chancre	62	10.11							2.50	.4
68–74	38b	Gonococcus infection	345	56.28	1	.16					18.02	2.9
75–79	39–45	Cancer and other malignant tumors	1	.16				1	1	.16	.22	.0
80	46	Benign tumors	23	3.75							.81	.1
81–85	47–48	Rheumatism, articular, all	11	1.79							1.26	.2
81–82	47	Acute articular rheumatism	9	1.47							1.06	.1
83–85	48	Chronic articular rheumatism	2	.33							.20	.0
87–88	50	Diabetes	1	.16							.02	.0
97–100	56	Alcoholism and results	70	11.42							.92	.1
103–104	59	Other chronic poisoning, including drug habit	5	.82							.04	.0
108	61a	Epidemic cerebrospinal meningitis	1	.16							1.01	.1
110–115	63	Other diseases of spinal cord	1	.16	1	.16					.26	.0
116	64	Cerebral hemorrhage, apoplexy	1	.16				1	1	.16	.01	.0
117–119	66	Paralysis without specified cause	4	.65							.46	.0
120–126	67–68	Mental alienation	29	4.73	22	3.51					2.93	.4
127	69	Epilepsy	5	.82	1	.16					.24	.0
129–133	73	Neuralgia and neuritis	34	5.55							2.28	.3
138–141	75a	Conjunctivitis	22	3.59							.26	.0
166	77	Pericarditis	1	.16							.10	.0
167	78	Acute endocarditis	1	.16				1	1	.16	.04	.0
169–174	79	Organic heart disease	16	2.61	3	.48					1.17	.1
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc			1	.16						
181	83b	Hemorrhoids	44	7.18							2.07	.3
183	83d	Varicose veins	3	.49							.25	.0
184	83e	Varicocele	26	4.24							1.31	.2
185–187	84	Diseases of the lymphatic system	18	2.94							.71	.1
193–199	86	Diseases of the nasal fossæ	31	5.06							.47	.0
200–202	87	Diseases of the larynx	4	.65							.19	.0
203–204	88	Diseases of the thyroid body	1	.16							.07	.0
205–206	89–90	Bronchitis	344	56.12							6.57	1.0
207	91	Bronchopneumonia	2	.33							.23	.0
208	92	Pneumonia	6	.98							.67	.1
209–215	93	Pleurisy	7	1.14	1	.16					.71	.1
219	96	Asthma	7	1.14							.32	.0
221	98a	Hæmoptysis	2	.33							.15	.0
224–227	99a	Diseases of the teeth and gums	27	4.40							.74	.1
228–231	99b	Other diseases of the mouth and annexa	5	.82							.26	.0
232–236	100	Diseases of the pharynx	218	35.56							3.06	.5
238	102	Ulcer of stomach	1	.16							.18	.0
239–244	103	Other diseases of stomach (cancer excepted)	97	15.82							2.47	.4
245–253	105	Diarrhea and enteritis	129	21.04							1.38	.2
254	106	Ankylostomiasis	1	.16							.05	.0
255–259	107	Intestinal parasites	7	1.14							.11	.0
260	108	Appendicitis	59	9.62							5.39	.8

[1] Number of discharges and deaths which actually occurred.

with ratios per 1,000 of mean strength, for enlisted American troops serving in Hawaii, 1913.

Hawaii, white, enlisted men. S. G. O., 5082—A. G. O., 5211.									Hawaii, colored, enlisted men. S. G. O., 1048—A. G. O., 1048.								
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
		Number.			Number.							Number.			Number.				
Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.	Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.
46	9.05							0.91	0.18	6	5.73							0.08	0.08
37	7.28							.59	.12	6	5.73							.08	.08
9	1.77							.32	.06										
49	9.64							3.22	.63	7	6.68							.45	.43
2	.39							.10	.02										
132	25.97							2.21	.43	28	26.72							.46	.44
2	.39							.15	.03	1	.95							.08	.08
2	.39							.15	.03	1	.95							.08	.08
11	2.16							.82	.18	28	26.72							1.27	1.21
16	3.15	5		0.96	1		0.19	1.17	.23	10	9.54	1		0.95	4		3.82	.78	.74
15	2.95	5		.96	1		.19	1.09	.21	9	8.59	1		.95	4		3.82	.67	.64
1	.20							.08	.02	1	.95							.11	.11
411	80.87	4		.77				23.39	4.60	151	144.08	1		.95	1	1	.95	7.48	7.14
109	21.45	3		.58				6.98	1.37	46	43.89	1		.95	1	1	.95	3.37	3.21
44	8.66							1.66	.33	18	17.18							.84	.80
258	50.77	1		.19				14.75	2.90	87	83.02							3.27	3.12
1	.20				1	1	.19	.22	.04										
20	3.94							.73	.14	3	2.86							.08	.08
10	1.97							1.24	.24	1	.95							.02	.02
8	1.57							1.04	.20	1	.95							.02	.02
2	.39							.20	.04										
										1	.95							.02	.02
66	12.99							.88	.17	4	3.82							.04	.04
5	.98							.04	.01										
1	.20							1.01	.20										
										1	.95	1		.95				.26	.25
1	.20				1	1	.19	.01	.00										
4	.79							.46	.09										
25	4.92	20		3.84				2.27	.45	4	3.82	2		1.91				.66	.62
5	.98	1		.19				.24	.05										
22	4.33							1.64	.32	12	11.45							.64	.61
16	3.15							.18	.04	6	5.73							.07	.07
1	.20							.10	.02										
1	.20				1	1	.19	.04	.01										
9	1.77	2		.38				.71	.14	7	6.68	1		.95				.46	.44
		1		.19															
36	7.08							1.70	.33	8	7.63							.37	.35
2	.39							.16	.03	1	.95							.09	.08
26	5.12							1.31	.26										
16	3.15							.56	.11	2	1.91							.15	.14
22	4.33							.34	.07	9	8.59							.13	.12
1	.20							.01	.00	3	2.86							.18	.17
1	.20							.07	.01										
248	48.80							4.89	.96	96	91.60							1.68	1.60
1	.20							.06	.01	1	.95							.17	.16
5	.98							.57	.11	1	.95							.10	.10
6	1.18	1		.19				.69	.14	1	.95							.02	.02
2	.39							.05	.01	5	4.77							.27	.26
1	.20							.09	.02	1	.95							.06	.06
23	4.53							.71	.14	4	3.82							.03	.03
5	.98							.26	.05										
172	33.85							2.42	.48	46	43.89							.64	.61
										1	.95							.18	.18
75	14.76							2.05	.40	22	20.99							.42	.40
81	15.94							.92	.18	48	45.80							.46	.44
1	.20							.05	.01										
6	1.18							.10	.02	1	.95							.01	.01
45	8.85							4.21	.83	14	13.36							1.18	1.12

[1] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

TABLE NO. 74.—*Admissions to sick report, discharges, deaths, and noneffectiveness, year*

Serial Nos.	International classification.	Causes of admission to sick report.	Hawaii, total enlisted men, white and colored. Mean strength..... S. G. O., 6130—A. G. O., 6259. Admissions. Number.	Admissions. Ratio.	Discharges. Number. (1)	Discharges. Number. (2)	Discharges. Ratio.	Deaths. Number. (1)	Deaths. Number. (2)	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
261–263	109	Hernia	22	3.59		2	0.32	1	1	0.16	3.09	0.50
264–267	110a	Diseases of the anus and fecal fistula	7	1.14							.55	.09
268–272	110b	Other diseases of the intestines	121	19.74							1.19	.19
275	113	Cirrhosis of liver	1	.16				1	1	.16	.21	.03
277–281	115	Other diseases of liver and gall bladder	18	2.94							1.25	.20
288	119	Acute nephritis	1	.16							.05	.01
289–291	120	Bright's disease	3	.49		1	.16				.40	.06
293–299	122	Other diseases of the kidney and annexa	2	.33							.10	.02
303–30(	12(	Disease of the bladder	25	4.08		3	.48				1.61	.26
30(	122b	Enuresis	13	2.12		3	.48				.85	.14
307–30(	12(	Diseases of the urethra, urinary abscess, etc	21	3.43							.45	.07
310–31(	126	Diseases of the prostate	1	.16							.18	.03
313–31(	127	Diseases of the male genital organs (nonvenereal)	31	5.06							.65	.11
322–32(	143	Furuncle and carbuncle	215	35.08							3.78	.62
324–32(	144	Acute abscess and cellulitis	99	16.15							2.78	.45
352–35	146	Diseases of the bones	19	3.10							1.21	.20
358–36(	147	Diseases of the joints	26	4.24		3	.48				2.19	.36
36(	149g	Flat foot	14	2.28		4	.64				.75	.12
37(	150	Congenital malformations	14	2.28							.64	.11
37(	189Aa	Febricula, simple continued, and other fevers of undetermined causation	8	1.31							.15	.02
37(	189Ba	Under observation, undiagnosed and unknown	15	2.45				1	1	.16	1.13	.18
38(	189Bb	Malingering	8	1.31							1.07	17
		For diseases not mentioned above	392	63.95		6	.96	1	1	.16	12.48	2.04
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[3]										
426–434	155–163	Suicides, all	1	.16				1	1	.16		
435	164	Poisoning by food	7	1.14								
436	165a	Venomous bites and stings	4	.65								
437	165b	Other poisoning (deleterious gases excepted)	5	.82				3	3	.48		
439	167	Burns (conflagrations excepted)	20	3.26								
442	169	Drowning, accidental						4	4	.64		
443	170	Traumatism by firearms (other than specified)	10	1.63		1	.16	2	2	.32		
444	170a	Shot by sentry or guard	1	.16								
445	171	Traumatism by cutting or piercing instruments	108	17.62		1	.16					
446	172	Traumatism by fall	409	66.72								
448	174	Traumatism by machines	9	1.47								
449	175	Traumatism by other crushing	31	5.06								
450	176	Injuries by animals	90	14.68								
453	179	Effects of heat	17	2.77								
459	185	Fractures, causes not specified	1	.16								
460	186	Other external violence	348	56.77		2	.32					
425	186	Secondary results of injury	12	1.96								
		DISEASES AND INJURIES GROUPED.										
		General diseases	1,019	166.23		11	1.76	3	8	1.28	46.61	7.60
	1–19	Epidemic diseases	314	51.22							9.78	1.59
	20–59	Other general diseases	705	115.01		11	1.76	3	8	1.28	36.83	6.01
		Diseases of the nervous system and organs of special sense	182	29.69		29	4.63	1	1	.16	10.84	1.76

[1] Number of discharges and deaths which actually occurred.
[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

with ratios per 1,000 of mean strength, for enlisted American troops serving in Hawaii, 1913—Continued.

Hawaii, white, enlisted men. S. G. O., 5082—A. G. O., 5211.									Hawaii, colored, enlisted men. S. G. O., 1048—A. G. O., 1048.								
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number. (1)	Number. (2)	Ratio	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.	Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
14	2.76		2	0.38	1	1	0.19	2.04	0.40	8	7.63							1.05	1.00
5	.98							.41	.08	2	1.91							.14	.13
86	16.92							.90	.18	35	33.40							.29	.27
1	.20				1	1	.19	.21	.04										
15	2.95							1.02	.20	3	2.86							.23	.22
1	.20							.05	.01										
1	.20							.32	.06	2	1.91		1	.95				.08	.08
2	.39							.10	.02										
13	2.56		1	.19				1.09	.22	12	11.45		2	1.91				.52	.50
5	.98		1	.19				.39	.08	8	7.63		2	1.91				.46	.44
18	3.54							.41	.08	3	2.86							.05	.04
1	.20							.18	.04										
25	4.92							.57	.11	6	5.73							.08	.08
207	40.73							3.61	.71	8	7.63							.17	.16
91	17.91							2.45	.48	8	7.63							.33	.32
18	3.54							1.14	.22	1	.95							.06	.06
18	3.54		2	.38				1.82	.36	8	7.63		1	.95				.37	.35
9	1.77		4	.77				.53	.10	5	4.77							.22	.21
13	2.56							.62	.12	1	.95							.02	.02
8	1.57							.15	.03										
11	2.16				1	1	.19	.86	.17	4	3.82							.27	.27
4	.79							.30	.06	4	3.82							.76	.73
311	61.20		5	.96	1	1	.19	10.14	1.99	81	77.29		1	.95				2.34	2.24
1	.20				1	1	.19												
7	1.38																		
3	.59									1	.95								
5	.98				3	3	.58												
18	3.54									2	1.91								
					1	1	.19								3	3	2.86		
9	1.77		1	.19	1	1	.19			1	.95				1	1	.95		
1	.20																		
92	18.10		1	.19						16	15.27								
340	66.91									69	65.84								
9	1.77																		
27	5.31									4	3.82								
89	17.51									1	.95								
16	3.15									1	.95								
1	.20																		
285	56.08		2	.38						63	60.11								
8	1.57									4	3.82								
779	153.29		9	1.73	2	3	.58	35.84	7.05	240	229.01		2	1.91	1	5	4.77	10.77	10.28
244	48.01							7.44	1.46	70	66.79							2.34	2.23
535	105.27		9	1.73	2	3	.58	28.40	5.59	170	162.21		2	1.91	1	5	4.77	8.43	8.04
144	28.34		25	4.79	1	1	.19	8.69	1.71	38	36.26		4	3.81				2.14	2.05

[3] Noneffectiveness for individual external causes not tabulated.

TABLE No. 74.—*Admissions to sick report, discharges, deaths, and noneffectiveness, year*

Serial Nos.	International classification.	Causes of admission to sick report.	Hawaii, total enlisted men, white and colored.								
		Mean strength	S. G. O., 6130—A. G. O., 6259.								
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
		DISEASES AND INJURIES GROUPED—contd.										
		Diseases of the nervous system and organs of special sense—Continued.										
60–74		Of the nervous system	104	16.97	.....	26	4.15	1	1	0.16	8.65	1.41
75		Of the eye and its annexa	59	9.62	.....	2	.32	...	...	....	1.27	.21
76		Of the ear and its annexa	19	3.10	.....	1	.16	...	...	....	.92	.14
77–85		Diseases of the circulatory system	127	20.72	.....	4	.64	1	1	.16	6.04	.98
86–98		Diseases of the respiratory system	405	66.07	.....	1	.16	...	...	....	9.40	1.53
99–118		Diseases of the digestive system	713	116.31	.....	2	.32	2	2	.32	19.95	3.25
119–127		Diseases of the genito-urinary system	88	14.36	.....	4	.64	...	...	....	3.51	.57
142–145		Diseases of the skin and cellular tissue	481	78.47	.....	...	.....	...	...	....	10.83	1.77
146–149		Diseases of the organs of locomotion	158	25.77	.....	8	1.28	...	...	....	7.59	1.24
150		Malformations, etc	14	2.28	.....	...	.....	...	...	....	.64	.11
189		Ill-defined diseases	41	6.69	.....	...	.....	1	1	.16	2.47	.40
		Total for disease	3,228	526.59	.....	59	9.43	8	13	2.08	117.88	19.23
155–186		External causes	1,073	175.04	.....	4	.64	10	10	1.60	30.35	4.95
		Total for disease and external causes	4,301	701.63	.....	63	10.07	18	23	3.67	148.23	24.18

[1] Number of discharges and deaths which actually occurred.

with ratios per 1,000 of mean strength, for enlisted American troops, serving in Hawaii, 1913—Continued.

Hawaii, white, enlisted men.									Hawaii, colored, enlisted men.								
S. G. O., 5082—A. G. O., 5211.									S. G. O., 1048—A. G. O., 1048.								
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
		(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
81	15.94	.....	23	4.41	1	1	0.19	6.92	1.36	23	21.95	...	3	2.86	...	...	.....	1.73	1.65
47	9.25	.....	1	.19	...	...	.....	.88	.17	12	11.45	...	1	.95	...	...	.....	.39	.37
16	3.15	.....	1	.19	...	...	.....	.89	.18	3	2.86	...	...	.....	...	...	.....	.03	03
104	20.46	.....	3	.58	1	1	.19	4.87	.96	23	21.95	...	1	.95	...	...	.....	1.16	1.11
288	56.67	.....	1	.19	...	...	.....	6.79	1.34	117	111.64	...	...	.....	...	...	.....	2.61	2.49
529	104.09	.....	2	.38	2	2	.38	15.31	3.01	184	175.57	...	...	.....	...	...	.....	4.64	4.42
65	12.79	.....	1	.19	...	...	.....	2.78	.55	23	21.95	...	3	2.86	...	...	.....	.73	.70
437	85.99	.....	...	.....	...	...	.....	9.64	1.90	44	41.98	...	...	.....	...	...	.....	1.19	1.13
111	21.84	.....	7	1.34	...	...	.....	5.89	1.16	47	44.85	...	1	.95	...	...	.....	1.70	1.62
13	2.56	.....	...	.....	...	...	.....	.62	.12	1	.95	...	...	.....	...	...	.....	.02	.02
33	6.49	.....	...	.....	1	1	.19	1.44	.28	8	7.63	...	...	.....	...	...	.....	1.03	.99
2,503	492.52	.....	48	9.21	7	8	1.54	91.88	18.08	725	691.79	...	11	10.50	1	5	4.77	25.99	24.80
911	179.26	.....	4	.77	6	6	1.15	25.82	5.08	162	154.58	...	...	.....	4	4	3.82	4.53	4.32
3,414	671.78	.....	52	9.98	13	14	2.69	117.70	23.16	887	846.37	...	11	10.50	5	9	8.59	30.52	29.13

[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

TABLE No. 75.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with Porto Rican native troops, and for*

Serial Nos.	International classification.	Causes of admission to sick report.	Army transports, American enlisted men, white and colored. Mean strength 686. Admissions. Number.	Admissions. Ratio.	Discharges. Number.	Discharges. Ratio.	Deaths. Number.	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
2	1a	Paratyphoid fever							0.60	0.87
7–11	4	Malaria	35	51.02					.05	.08
7	.....	Æstivo-autumnal fever	2	2.92					.13	.19
8	.....	Malarial cachexia								
9	.....	Quartan malarial fever								
10	.....	Tertian malarial fever	19	27.70					.27	.40
11	.....	Undetermined malarial fever	14	20.41					.14	.21
12	5	Smallpox and varioloid								
13	5b	Vaccinia	2	2.92					.02	.03
14	6	Measles	2	2.92					.04	.05
18	10	Influenza	4	5.83					.03	.04
21–23	14	Dysentery	3	4.37					.33	.49
21	.....	Bacillary								
22	.....	Entamebic	2	2.92					.30	.44
23	.....	Unclassified	1	1.46					.04	.05
29	19b	Dengue	2	2.92					.03	.04
31	19d	German measles	19	27.70					.43	.63
34	19g	Mumps	18	26.24					.45	.65
37	20	Purulent infection and septicemia								
49–57	28–34	Tuberculosis, all	3	4.37			1	1.46	7.35	10.71
49–51	28	Tuberculosis of lungs	3	4.37			1	1.46	7.06	10.30
52	29	Miliary tuberculosis, acute								
53–57	30–34	Tuberculosis of other organs							.28	.41
59, 74	37–38	Venereal diseases, all	41	59.77					3.80	5.54
59–64	37	Syphilis	4	5.83					1.20	1.75
65–67	38a	Soft chancre	11	16.03					.32	.47
68–74	38b	Gonococcus infection	26	37.90					2.28	3.32
75–79	39–45	Cancer and other malignant tumors								
80	46	Benign tumors							.08	.11
81–85	47–48	Rheumatism, articular, all							.32	.46
81–82	47	Acute articular rheumatism							.08	.12
83–85	48	Chronic articular rheumatism							.24	.34
87–88	50	Diabetes							.17	.25
89	51	Exophthalmic goitre							.08	.12
97–100	56	Alcoholism and results	5	7.29					.98	1.42
101–102	57–58	Chronic occupational poisoning							.08	.12
103–104	59	Other chronic poisoning, including drug habit.							.08	.12
108	61a	Epidemic cerebrospinal meningitis	2	2.92					.01	.01
109	62	Locomotor ataxia							.07	.10
110–115	63	Other diseases of spinal cord							.10	.15
120–126	67–68	Mental alienation	4	5.83					5.37	7.82
127	69	Epilepsy	1	1.46					.80	1.17
129–133	73	Neuralgia and neuritis	2	2.92					.65	.95
138–141	75a	Conjunctivitis	4	5.83					.07	.10
166	77	Pericarditis							.08	.12
167	78	Acute endocarditis	1	1.46					.01	.01
169–174	79	Organic heart disease							.21	.30
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc.	1	1.46					.08	.12
178–179	82	Embolism and thrombosis							.08	.12
181	83b	Hemorrhoids	2	2.92					.05	.08
185–187	84	Diseases of the lymphatic system	1	1.46					.11	.16
193–199	86	Diseases of the nasal fossæ	7	10.20					.05	.08
200–202	87	Diseases of the larynx								
203–204	88	Diseases of the thyroid body								
205–206	89–90	Bronchitis	10	14.58					.24	.36
207	91	Bronchopneumonia							.10	.15
208	92	Pneumonia	4	5.83					.18	.26
209–215	93	Pleurisy	1	1.46					.08	.12
219	96	Asthma							.10	.15
221	98a	Hæmoptysis								
224–227	99a	Diseases of the teeth and gums	2	2.92					.02	.03
228–231	99b	Other diseases of the mouth and annexa.							.08	.12

ratios per 1,000 of mean strength, for enlisted American troops on Army transports, for Philippine Scouts, year 1918.

Porto Rican native troops.								Philippine Scouts.							
594.								S. G. O., 5096—A. G. O., 5236.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
								1	0.20					0.05	0.01
19	31.99					0.35	0.59	986	193.49			3	0.57	16.72	3.28
								225	44.15			1	.19	5.62	.98
								23	4.51			1	.19	.42	.08
19	31.99					.35	.59	695	136.38			1	.19	10.70	2.10
								43	8.44					.58	.11
								7	1.37			1	.19	.52	.10
7	11.78					.13	.22								
15	25.25					.18	.30	6	1.18					.08	.02
5	8.42					.08	.14	36	7.06					1.52	.30
								9	1.77					.40	.08
5	8.42					.08	.14	21	4.12					1.01	.20
								6	1.18					.12	.02
								65	12.75					.92	.18
25	42.05					.75	1.27	39	7.65					1.81	.36
								2	.39			3	.57	.08	.02
7	11.78	4	6.73	2	3.37	.81	1.37	32	6.28	37	7.07	1	.19	4.32	.85
3	5.05	2	3.37	1	1.68	.36	.61	32	6.28	37	7.07	1	.19	4.32	.85
3	5.05	2	3.37	1	1.68	.42	.70								
1	1.68					.04	.06								
46	77.44					2.91	4.89	185	36.30					9.78	1.92
10	16.84					1.22	2.05	18	3.53					1.10	.22
18	30.30					.84	1.41	17	3.34					1.21	.24
18	30.30					.85	1.43	150	29.44					7.47	1.47
								1	.20					.21	.04
3	5.05					.04	.06	13	2.55					.46	.09
2	3.37					.21	.36	19	3.73					1.10	.22
2	3.37					.21	.36	18	3.53					.93	.18
								1	.20					.17	.03
								1	.20					.04	.01
2	3.37					.05	.09	1	.20					.00	.00
										1	.19			.06	.01
								2	.39	1	.19	1	.19	.25	.05
4	6.73					.06	.10								
6	10.10					.07	.12	19	3.73					.77	.15
9	15.15					.24	.40	70	13.74					1.39	.27
										1	.19			.16	.03
								1	.20					.04	.01
3	5.05					.11	.19	6	1.18					.13	.03
15	25.25					.84	1.41	22	4.32					.84	.16
37	62.29					.49	.83	20	3.92					.30	.06
								7	1.37					.22	.04
								1	.20					.02	.00
						.01	.02	197	38.66	1	.19			5.27	1.03
								5	.98					.27	.05
1	1.68					.04	.06	11	2.16			2	.38	.68	.13
1	1.68					.01	.02	7	1.37					1.03	.20
2	3.37					.05	.09	4	.78					.13	.03
								1	.20					.01	.00
5	8.42					.06	.11	38	7.46					.84	.16
1	1.68					.10	.17	6	1.18					.11	.02

TABLE No. 75.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with Porto Rican native troops, and for*

Serial Nos.	International classification.	Causes of admission to sick report.	Army transports, American enlisted men, white and colored.							
		Mean strength	686.							
			Admissions.		Discharges.		Deaths.		Noneffective.	
			Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
232–236	100	Diseases of the pharynx	27	39.36					0.31	0.45
238	102	Ulcer of stomach							.15	.22
239–244	103	Other diseases of stomach (cancer excepte l).	19	27.70					.44	.64
245–253	105	Diarrhea and enteritis	17	24.78					.19	.28
254	106	Ankylostomiasis							.08	.12
255–259	107	Intestinal parasites								
260	108	Appendicitis	1	1.46					.26	.38
261–263	109	Hernia							.18	.27
264–267	110a	Diseases of the anus and fecal fistula								
268–272	110b	Other diseases of the intestines	21	30.61					.53	.77
276	114	Biliary calculi								
277–281	115	Other diseases of liver and gall bladder	2	2.92					.14	.20
283–284	117	Simple peritonitis								
288	119	Acute nephritis								
289–291	120	Bright's disease					1	1.46	.09	.13
303–306	124	Diseases of the bladder	2	2.92					.17	.25
304	124b	Enuresis							.15	.22
307–309	125	Diseases of the urethra, urinary abscess, etc	2	2.92					.09	.14
310–312	126	Diseases of the prostate								
313–319	127	Diseases of the male genital organs (nonvenereal)	1	1.46					.02	.02
322–323	143	Furuncle and carbuncle	2	2.92					.04	.05
324–325	144	Acute abscess and cellulitis	1	1.46					.03	.04
352–357	146	Diseases of the bones	1	1.46					.15	.21
358–360	147	Diseases of the joints	1	1.46					.32	.46
367	149g	Flat foot							.12	.18
372	150	Congenital malformations								
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation								
379	189Ba	Under observation, undiagnosed and unknown							.23	.34
380	189Bb	Malingering							.02	.04
		For diseases not mentioned above	44	64.14					2.33	3.40
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[1]								
435	164	Poisoning by food								
436	165a	Venomous bites and stings								
437	165b	Other poisoning (deleterious gases excepted)								
439	167	Burns (conflagrations excepted)	3	4.37						
443	170	Traumatism by firearms (other than specified)								
445	171	Traumatism by cutting or piercing instruments	1	1.46						
446	172	Traumatism by fall	2	2.92						
448	174	Traumatism by machines								
449	175	Traumatism by other crushing	2	2.92						
450	176	Injuries by animals								
453	179	Effects of heat								
456–458	182–4	Homicides, all								
460	186	Other external violence	11	16.04						
425	186	Secondary results of injury								
462–466		Killed or wounded in action								
462		By bullet								
464		By sword or bayonet								
465		By bolo, kris, etc								
466		By other weapon								

[1] Noneffectiveness for individual external causes not tabulated.

ratios per 1,000 of mean strength, for enlisted American troops on Army transports, for Philippine Scouts, year 1913—Continued.

Porto Rican native troops.								Philippine scouts.							
594.								S. G. O., 5096—A. G. O. 5,236.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
21	35.35					0.30	0.51	41	8.05					0.67	0.13
								34	6.67					.27	.05
41	69.03					.39	.66	110	21.59					1.34	.26
13	21.89					.19	.31	23	4.51					.43	.08
5	8.42					.07	.11	22	4.32					.38	.08
								3	.59	1	0.19	1	0.19	.27	.05
2	3.37					.20	.33	4	.78					.44	.09
								3	.59					.17	.03
12	20.20					.23	.38	271	53.18					3.03	.60
								1	.20					.04	.01
5	8.42					.13	.23	9	1.77					.33	.06
								1	.20			1	.19	.02	.00
								1	.20					.01	.00
								1	.20	1	.19			.15	.03
2	3.37					.05	.08	2	.39					.04	.01
1	1.68					.01	.01	1	.20					.01	.00
								1	.20					.02	.00
22	37.04					.74	1.24	14	2.75					.42	.08
3	5.05					.04	.07	121	23.74					2.75	.54
47	79.12					.88	1.48	97	19.03					2.96	.58
3	5.05					.32	.54	3	.59					.15	.03
2	3.37					.39	.66	11	2.16					.39	.08
1	1.68					.03	.05	2	.39					.03	.01
								33	6.48					.66	.13
								1	.20					.02	.00
								2	.39					.01	.00
39	65.66					1.16	1.96	360	70.64	2	.38	1	.19	10.32	2.02
2	3.37							7	1.37						
1	1.68							11	2.16						
								1	.20						
2	3.37							13	2.55						
2	3.37	1	1.68					11	2.16	1	.19				
7	11.78							54	10.60						
10	16.84							86	16.88						
1	1.68														
2	3.37							25	4.91						
1	1.68							2	.39						
								10	1.96						
								1	.20			2	.38		
24	40.40							193	37.87						
								5	.98						
								69	13.54	2	.38	32	6.11		
								47	9.22	1	.19	30	5.73		
								1	.20						
								4	.78	1	.19	2	.38		
								17	3.34						

TABLE NO. 75.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with Porto Rican native troops, and for*

Serial Nos.	International classification.	Causes of admission to sick report.	Army transports, American enlisted men, white and colored.							
		Mean strength	686.							
			Admissions.		Discharges.		Deaths.		Noneffective.	
			Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
		DISEASES AND INJURIES GROUPED.								
		General diseases	134	195.34	.....	.....	1	1.46	14.95	21.79
1–19		Epidemic diseases	85	123.91	.....	.....	.....	.....	1.92	2.80
20–59		Other general diseases	49	71.43	.....	.....	1	1.46	13.03	18.99
		Diseases of the nervous system and organs of special sense	19	27.70	.....	.....	.....	.....	8.44	12.31
60–74		Of the nervous system	11	16.04	.....	.....	.....	.....	8.05	11.73
75		Of the eye and its annexa	4	5.83	.....	.....	.....	.....	.19	.28
76		Of the ear and its annexa	4	5.83	.....	.....	.....	.....	.21	.30
77–85		Diseases of the circulatory system	6	8.75	.....	.....	.....	.....	.62	.91
86–98		Diseases of the respiratory system	23	33.53	.....	.....	.....	.....	.77	1.13
99–118		Diseases of the digestive system	89	129.74	.....	.....	.....	.....	2.38	3.46
119–127		Diseases of the genito-urinary system	6	8.75	.....	.....	1	1.46	.38	.55
142–145		Diseases of the skin and cellular tissue	11	16.04	.....	.....	.....	.....	.34	.50
146–149		Diseases of the organs of locomotion	5	7.29	.....	.....	.....	.....	.94	1.37
150		Malformations, etc	.....	.....	.....	.....	.....	.....	.....	.....
189		Ill-defined diseases	24	34.99	.....	.....	.....	.....	.45	.65
		Total for disease	317	462.10	.....	.....	2	2.92	29.27	42.67
155–186		External causes	19	27.70	.....	.....	.....	.....	1.83	2.67
		Total for disease and external causes	336	489.80	.....	.....	2	2.92	31.11	45.35

ratios per 1,000 of mean strength, for enlisted American troops on Army transports, for Philippine Scouts, year 1913—Continued.

Porto Rican native troops.								Philippine scouts.							
594.								S. G. O. 5096—A. G. O. 5236.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
139	234.01	4	6.73	2	3.37	5.67	9.55	1,430	280.61	38	7.26	8	1.53	39.02	7.66
79	133.00					1.65	2.78	1,175	230.57			4	.76	22.75	4.46
60	101.01	4	6.73	2	3.37	4.02	6.77	255	50.04	38	7.26	4	.76	16.27	3.19
28	47.14					.53	.89	130	25.51	3	.57	1	.19	4.41	.87
12	20.20					.15	.26	24	4.71	3	.57	1	.19	1.42	.28
16	26.94					.38	.63	90	17.66					2.35	.46
								16	3.14					.64	.13
18	30.30					.95	1.60	29	5.69	1	.19			1.17	.23
42	70.71					.65	1.10	254	49.84	1	.19	2	.38	7.95	1.56
10	176.77					1.67	2.81	566	111.07	1	.19	2	.38	8.34	1.64
2	43.77					.80	1.34	20	3.92	1	.19			.66	.13
6	104.38					1.39	2.34	454	89.09			1	.19	11.73	2.30
13	21.89					1.04	1.75	61	11.97					1.46	.29
1	1.68					.03	.05	2	.39					.03	.01
								37	7.26					.70	.14
434	730.64	4	6.73	2	3.37	12.73	21.43	2,983	585.36	45	8.59	14	2.67	75.48	14.81
52	87.54	1	1.68			1.87	3.15	488	95.76	3	.57	34	6.49	17.81	3.49
486	818.18	5	8.42	2	3.37	14.60	24.58	3,471	681.12	48	9.17	48	9.17	93.29	18.31

TABLE No. 76.—*Admissions to sick report, discharges, deaths, and noneffectiveness at home stations, placed in comparison with the sam*

Serial Nos.	International classification.	Causes of admission to sick report.	United States (at home).				Alaska.				Panama Canal Zone.			
			Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
1	1	Typhoid fever	0.05			0.01								
2	1a	Paratyphoid fever	.05			.01					1.25			0.1
5	2	Typhus fever												
7–11	4	Malaria	8.79	0.02		.18	1.75			0.03	145.55			5.3
7		Estivo-autumnal fever	.67			.02					110.41			4.3
8		Malarial cachexia	.02	.02		.01								
9		Quartan malarial fever	.20			.00								
10		Tertian malarial fever	7.11			.13	1.75			.03	35.13			.9
11		Undetermined malarial fever	.79			.01								
12	5	Smallpox and varioloid	.03			.00								
13	5b	Vaccinia	11.76			.15								
14	6	Measles	7.67	.02	0.18	.42								
15	7	Scarlet fever	.05			.01					1.25			.0
17	9	Diphtheria	.30			.02	.88			.03				
18	10	Influenza	15.15			.22	36.81			.42	32.62			.5
19	12	Asiatic cholera												
21–23	14	Dysentery	1.09	.03	.02	.10	.88			.01	3.76			.1
21		Bacillary	.08			.01					2.51			.1
22		Entamebic	.70	.03	.02	.08	.88			.01	1.25			.0
23		Unclassified	.30			.01								
27	18	Erysipelas	.69			.04				.01				
29	19b	Dengue	.18			.00								
31	19d	German measles	2.67			.07								
34	19g	Mumps	8.29			.38	1.75			.09				
37	20	Purulent infection and septicemia	.13		.07	.02								
42–46	25	Mycoses	.05			.00								
47		Pellagra	.02	.02		.00								
49–57	28–34	Tuberculosis, all	3.07	2.16	.40	2.34	1.75	1.75		.53	3.76	2.51		.6
49–51	28	Tuberculosis of lungs	2.62	1.93	.27	2.18	1.75	1.75		.33	3.76	2.51		.6
52	29	Miliary tuberculosis, acute	.03		.03	.00								
53–57	30–34	Tuberculosis of other organs	.42	.23	.10	.15				.19				
59–74	37–38	Venereal diseases, all	85.83	1.01	.07	3.58	25.42			.76	196.99	1.25		5.4
59–64	37	Syphilis	20.99	.35	.07	1.17	9.64			.35	25.09	1.25		1.5
65–67	38a	Soft chancre	15.38			.57	1.75			.02	92.85			1.7
68–74	38b	Gonococcus infection	49.46	.66		1.84	14.02			.39	79.05			2.2
75–79	39–45	Cancer and other malignant tumors	.25	.08	.08	.07								
80	46	Benign tumors	1.27	.03		.06	4.38			.06	1.25			.0
81–85	47–48	Rheumatism, articular, all	7.65	.25		.63	10.52			.54	5.02			.0
81–82	47	Acute articular rheumatism	6.17	.07		.43	6.13			.17	3.76			.0
83–85	48	Chronic articular rheumatism	1.48	.18		.20	4.38			.37	1.25			.0
87–88	50	Diabetes	.20	.10	.03	.04					1.25	1.25		.0
89	51	Exophthalmic goitre	.15	.03		.03								
97–100	56	Alcoholism and results	14.24	.20	.05	.21	21.91			.15	11.29			.1
101–102	57–58	Chronic occupational poisoning	.03			.00								
103–104	59	Other chronic poisoning, including drug habit	.82	.12		.03	.88			.02				
105–106	60	Encephalitis	.03		.02	.00								
107	61	Simple meningitis	.07	.03	.03	.01								
108	61a	Epidemic cerebrospinal meningitis	.54	.05	.18	.09								
109	62	Locomotor ataxia	.03	.03		.01								
110–115	63	Other diseases of spinal cord	.08	.12		.05					1.25	1.25		.0
116	64	Cerebral hemorrhage, apoplexy	.05		.02	.00								
117–119	66	Paralysis without specified cause	.25			.01								

xpressed in ratios per 1,000 of mean strength, for American troops (enlisted men) on duty ata for those serving at distant stations, year 1918.

China.				Hawaii.				Army transports.				Philippines.				Total American Army.			
Admissions.	Discharges.	Deaths.	Nonoffective.	Admissions.	Discharges.	Deaths.	Nonoffective.	Admissions.	Discharges.	Deaths.	Nonoffective.	Admissions.	Discharges.	Deaths.	Nonoffective.	Admissions.	Discharges.	Deaths.	Nonoffective.
0.82	....	....	0.16	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.05	.....	.....	0.01
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.09	.....	.....	0.01	.06	.....	.....	.01
2.47	.....	.....	.43	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.04	.....	.....	.01
13.16	....	....	.24	8.48	.....	....	0.16	51.02	.....	0.87	112.08	.....	0.18	2.31	24.75	0.01	0.02	.53	
.82	.....	.....	.04	.....	.....	.....	.....	2.92	.....	.08	25.12	.....	.18	.72	5.10	.....	.02	.16	
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.19	1.34	.....	.....	.10	.20	.01	....	.03	
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1.07	.....	.....	.02	.30	.....	....	.01	
12.34	....	....	.21	7.01	.....	....	.11	27.70	.....	.40	78.65	.....	.....	1.37	17.47	.....	.....	.31	
.....	.....	.....	.....	1.47	.....	....	.05	20.41	.....	.21	5.90	.....	.....	.09	1.68	.....	.....	.03	
4.93	....	1.64	.36	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.10	.....	.02	.01
.82	.....	.....	.06	.....	.....	.....	.....	2.92	.....	.03	.....	.....	.....	.00	8.72	.....	.....	.11	
.....	.....	.....	.....	9.14	.....	.....	.60	2.92	.....	.05	.45	.....	.....	.01	6.44	.01	.13	.36	
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.05	.....	.....	.01	
1.64	.....	.....	.05	.33	.....	.....	.02	.....	.....	.....	.....	.....	.....	.....	.28	.....	.....	.02	
57.57	.....	.....	.85	26.10	.....	.....	.43	5.83	.....	.04	1.43	.....	.....	.02	15.12	.....	.....	.22	
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.09	.....	.09	.00	.01	.....	.01	.00	
.82	.....	.....	.14	.49	.....	.....	.04	4.37	.....	.49	20.83	0.09	.53	1.24	3.83	.04	.09	.26	
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.80	.....	.....	.06	.20	.....	.....	.02	
.82	.....	.....	.14	.49	.....	.....	.04	2.92	.....	.44	16.89	.09	.53	1.08	2.96	.04	.09	.22	
.....	.....	.....	.....	.....	.....	.....	.....	1.46	.....	.05	3.13	.....	.....	.09	.67	.....	.....	.02	
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.51	.....	.....	.03	
.....	.....	.....	.....	.....	.....	.....	.....	2.92	.....	.04	39.24	.....	.....	.56	5.60	.....	.....	.08	
.....	.....	.....	.....	.....	.....	.....	.....	27.70	.....	.63	1.70	.....	.....	.05	2.44	.....	.....	.06	
24.67	.....	.....	.86	6.36	.....	.....	.34	26.24	.....	.65	4.56	.....	.....	.33	7.85	.....	.....	.37	
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.09	.....	.09	.01	.11	.01	.06	.01
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.18	.....	.....	.04	.06	.....	.....	.01
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.01	.01	.....	.00
3.29	....	.82	.58	4.24	0.96	0.80	.32	4.37	1.46	10.71	6.70	3.95	.79	.56	3.66	2.26	.49	1.94	
2.47	.....	.....	.52	3.92	.96	.80	.29	4.37	1.46	10.30	6.17	3.69	.53	.48	3.22	2.06	.34	1.81	
.82	....	.82	.06	.....	.....	.....	.....	.....	.....	.....	.....	.18	.....	.18	.02	.06	.....	.06	.01
.....	.....	.....	.....	.33	.....	.....	.03	.....	.....	.....	.41	.36	.26	.09	.05	.38	.21	.09	.13
26.15	0.82	....	9.28	91.68	.80	.16	5.04	59.77	.....	5.54	149.45	2.11	....	8.92	97.22	1.13	.06	4.51	
51.81	.....	.....	2.83	25.29	.64	.16	1.69	5.83	.....	1.75	33.16	.53	....	1.97	23.22	.39	.06	1.34	
97.04	.....	.....	3.91	10.11	.....	.....	.41	16.03	.....	.47	29.14	.09	....	1.47	18.70	.01	....	.74	
77.30	.82	....	2.55	56.28	.16	....	2.94	37.90	.....	3.32	87.14	1.49	....	5.48	55.31	.72	....	2.43	
.....	.....	.....	.....	.16	.....	.16	.04	.....	.....	.....	.....	.....	.....	.....	.....	.20	.06	.07	.05
.....	.....	.....	.....	3.75	.....	....	.13	.....	.....	.11	.63	.09	....	.03	1.39	.04	....	.06	
6.58	.....	.....	.46	1.79	.....	....	.21	.....	.....	.46	5.01	.18	....	.45	6.77	.21	....	.56	
5.76	.....	.....	.25	1.47	.....	....	.17	.....	.....	.12	3.22	.....	.....	.16	5.32	.05	....	.36	
.82	.....	.....	.21	.33	.....	....	.03	.....	.....	.34	1.79	.18	....	.29	1.45	.16	....	.20	
.....	.....	.....	.....	.16	.....	....	.00	.....	.....	.25	.09	.09	....	.02	.19	.10	.02	.04	
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.12	.18	.09	....	.04	.14	.04	....	.03	
24.67	.82	....	.25	11.42	.....	.....	.15	7.29	.....	1.42	20.38	.44	....	.34	15.06	.22	.04	.23	
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.12	.09	.....	.....	.03	.04	.....	.....	.01	
.82	.....	.....	.01	.82	.....	....	.01	.....	.....	.12	.18	.09	....	.00	.72	.10	....	.03	
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.02	.....	.01	.00	
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.05	.02	.02	.01	
.....	.....	.....	.....	.16	.....	....	.17	2.92	.....	.01	.....	.....	.....	.....	.43	.04	.13	.08	
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.10	.....	.09	....	.....	.02	.04	....	.01	
.....	.....	.....	.....	.16	.16	....	.04	.....	.....	.15	.09	.09	....	.02	.10	.12	....	.05	
.....	.....	.....	.....	.16	.....	.16	.00	.....	.....	.....	.....	.....	.....	.....	.05	.....	.02	.00	
1.64	.....	.....	.06	.65	.....	.....	.07	.....	.....	.....	.09	.....	.....	.02	.27	.....	.....	.02	

TABLE No. 76.—*Admissions to sick report, discharges, deaths, and noneffectiveness at home stations, placed in comparison with the sam*

Serial Nos.	International classification.	Causes of admission to sick report.	United States (at home).				Alaska.				Panama Canal Zone.			
			Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
120–126	67–68	Mental alienation	2.92	2.24	....	0.81	5.26	5.26	....	0.95	3.76	3.76	....	0.80
127	69	Epilepsy	1.56	.73	....	.16								
129–133	73	Neuralgia and neuritis	5.05	.30	....	.31	5.26	.88	....	.21	8.76	1.25	....	.15
138–141	75a	Conjunctivitis	3.67	....	....	.07	.88	....	....	.13	1.25	....	....	.01
142	75b	Trachoma	.27	.12	....	.04	....	....	....	....	....	....	....	....
166	77	Pericarditis	.05	.02	.02	.01	....	....	....	....	....	....	....	....
167	78	Acute endocarditis	.07	....	....	.01	....	....	....	....	....	....	....	....
169–174	79	Organic heart disease	1.27	.48	.22	.19	....	....	....	....	3.76	2.51	....	.27
175	80	Angina pectoris	.20	....	....	.01	....	....	....	....	....	....	....	....
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc	.15	.07	.07	.04	....	....	....	....	....	....	....	....
178–179	82	Embolism and thrombosis	.05	.02	.02	.01	....	....	....	....	....	....	....	....
181	83b	Hemorrhoids	5.10	....	....	.14	7.01	....	....	.20	6.27	....	....	.30
183	83d	Varicose veins	.60	.02	....	.05	1.75	....	....	.10	....	....	....	....
184	83e	Varicocele	2.10	....	....	.11	.88	....	....	.04	2.51	....	....	.12
185–187	84	Diseases of the lymphatic system	4.68	....	....	.26	1.75	....	....	.12	21.33	....	....	1.71
193–199	86	Diseases of the nasal fossae	9.86	....	....	.12	6.13	....	....	.05	16.31	....	....	.31
200–202	87	Diseases of the larynx	2.57	....	....	.04	2.63	....	....	.03	....	....	....	....
203–204	88	Diseases of the thyroid body	.15	.03	....	.01	....	....	....	....	2.51	....	....	.24
205–206	89–90	Bronchitis	28.79	.08	....	.57	27.17	....	....	.47	20.08	....	....	.55
207	91	Bronchopneumonia	.30	....	.05	.03	....	....	....	.02	1.25	....	....	.02
208	92	Pneumonia	2.35	.05	.32	.20	2.63	....	....	.12	....	....	....	....
209–215	93	Pleurisy	2.48	.10	.07	.14	1.75	....	....	.03	3.76	....	....	.12
216–217	94	Pulmonary congestion and pulmonary apoplexy	.69	....	....	.01	....	....	....	....	....	....	....	....
219	96	Asthma	.94	.05	....	.06	....	....	....	....	....	....	....	....
220	97	Pulmonary emphysema	....	....	....	....	....	....	....	....	....	....	....	....
221	98a	Haemoptysis	.05	....	....	.00	.88	....	....	.04	....	....	....	....
222	98b	Hay fever	....	....	....	....	....	....	....	....	....	....	....	....
224–227	99a	Diseases of the teeth and gums	4.43	.02	....	.06	13.15	....	....	.13	3.76	....	....	.05
228–231	99b	Other diseases of the mouth and annexa	.77	....	....	.02	1.75	....	....	.15	1.25	....	....	.02
232–236	100	Diseases of the pharynx	53.25	.02	....	.75	28.05	....	....	.36	38.90	....	....	.97
238	102	Ulcer of stomach	.17	.02	....	.03	.88	....	....	.09	....	....	....	....
239–244	103	Other diseases of stomach (cancer excepted)	10.82	.02	....	.21	21.03	....	....	.28	6.27	....	....	.14
245–253	105	Diarrhea and enteritis	26.98	.03	.07	.30	11.39	....	....	.09	5.02	....	....	.10
254	106	Ankylostomiasis	1.34	....	.02	.02	....	....	....	....	....	....	....	....
255–259	107	Intestinal parasites	.97	....	....	.02	.88	....	....	.01	....	....	....	....
260	108	Appendicitis	7.01	.03	.13	.47	11.39	....	....	.84	22.58	1.25	1.25	1.59
261–263	109	Hernia	3.49	.17	.07	.37	1.75	....	....	.17	5.02	....	....	.43
264–267	110a	Diseases of the anus and fæcal fistula	1.01	.02	....	.07	....	....	....	....	1.25	....	....	.13
268–272	110b	Other diseases of the intestines	17.98	.05	....	.25	5.26	....	....	.06	2.51	....	....	.01
275	113	Cirrhosis of liver	....	....	....	....	.88	....	....	.06	....	....	....	....
276	114	Biliary calculi	.20	.02	....	.02	....	....	....	....	....	....	....	....
277–281	115	Other diseases of liver and gall bladder	3.52	.03	.03	.17	1.75	....	....	.01	2.51	....	....	.52
283–284	117	Simple peritonitis	.07	....	.02	.01	....	....	....	....	....	....	....	....
288	119	Acute nephritis	.30	....	.08	.02	.88	....	.88	.04	....	....	....	....
289–291	120	Bright's disease	.76	.27	.15	.13	....	....	....	....	....	....	....	....
293–299	122	Other diseases of the kidney and annexa	.20	.03	....	.03	....	....	....	....	....	....	....	....
303–306	124	Diseases of the bladder	1.91	.23	....	.12	1.75	....	....	.06	3.76	2.51	....	.06
304	124b	Enuresis	1.07	.23	....	.09	.88	....	....	.04	2.51	2.51	....	....
307–309	125	Diseases of the urethra, urinary abscess, etc	.57	....	....	.02	....	....	....	....	....	....	....	....
310–312	126	Diseases of the prostate	.12	....	....	.01	.88	....	....	.05	....	....	....	....

pressed in ratios per 1,000 of mean strength, for American troops (enlisted men) on duty ita for those serving at distant stations, year 1913—Continued.

China.				Hawaii.				Army transports.				Philippines.				Total American Army.			
Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
6.58	2.47	....	0.80	4.73	3.51	....	0.48	5.83	....	....	7.82	4.83	3.60	....	0.45	3.44	2.57	....	0 80
....	....	....	....	.82	.16	....	.04	1.46	....	....	1.17	1.52	.44	....	.14	1.44	.61	....	.15
8.22	....	....	.09	5.55	....	....	.37	2.92	....	....	.95	5.54	.44	....	.26	5.22	.31	....	.31
.82	....	....	.01	3.59	....	....	.04	5.83	....	....	.10	4.11	....	....	.06	3.64	....	....	.06
....	....	....	....	....	....	....	....	....	....	....	....	.09	....	....	.00	.21	.09	....	.03
....	....	....	....	.16	....	....	.02	....	....	....	.12	....	....	....	.01	.05	.01	0.01	.01
....	....	....	....	.16	....	0.16	.01	1.46	....	....	.01	....	....	....	....	.07	....	.01	.01
....	....	....	....	2.61	.48	....	.19	....	....	....	.30	.80	....	0.18	.05	1.29	.42	.18	.17
....	....	....	....	....	....	....	....	....	....	....	....	.18	....	....	.00	.17	....	....	.00
....	....	....	....	....	.16	....	....	1.46	....	....	.12	.18	....	.09	.02	.15	.06	.06	.03
....	....	....	....	....	....	....	....	....	....	....	.12	.18	.09	.09	.02	.06	.02	.02	.01
6.58	....	....	.14	7.18	....	....	.34	2.92	....	....	.08	7.69	....	....	.21	5.66	....	....	.17
....	....	....	....	.49	....	....	.04	....	....	....	....	1.79	....	....	.11	.76	.01	....	.05
2.47	....	....	.08	4.24	....	....	.21	....	....	....	....	4.65	.09	....	.27	2.59	.01	....	.13
8.91	....	....	.75	2.94	....	....	.12	1.46	....	....	.16	9.38	....	....	.45	5.51	....	....	.30
2.47	....	....	.05	5.06	....	....	.08	10.20	....	....	.08	11.62	....	....	.16	9.65	....	....	.12
4.93	....	....	.02	.65	....	....	.03	....	....	....	....	2.15	....	....	.05	2.35	....	....	.04
....	....	....	....	.16	....	....	.01	....	....	....	....	.09	....	....	.01	.16	.02	....	.01
2.20	....	....	.28	56.12	....	....	1.07	14.58	....	....	.36	27.97	.09	....	.69	30.42	.07	....	.62
....	....	....	....	.33	....	....	.04	....	....	....	.15	.18	....	....	.01	.28	....	.04	.03
9.05	....	1.64	1.05	.98	....	....	.11	5.83	....	....	.26	1.34	....	.18	.10	2.22	.04	.28	.19
3.45	....	....	.67	1.14	.16	....	.12	1.46	....	....	.12	2.77	....	....	.21	2.62	.09	.05	.16
....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	.51	....	....	.01
.82	....	....	.01	1.14	....	....	.05	....	....	....	.15	1.16	.09	....	.04	.95	.05	....	.06
....	....	....	....	....	....	....	....	....	....	....	....	.09	....	....	.00	.01	....	....	.00
....	....	....	....	.33	....	....	.02	....	....	....	....	.09	....	....	.00	.09	....	....	.00
....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	.00	....	....	....	.00
4.11	....	....	.04	4.40	....	....	.12	2.92	....	....	.03	4.47	....	....	.12	4.53	.01	....	.08
....	....	....	....	.82	....	....	.04	....	....	....	.12	1.16	....	....	.03	.83	....	....	.02
3.18	....	....	.45	35.56	....	....	.50	39.36	....	....	.45	35.12	....	....	.55	48.52	.01	....	.69
....	....	....	....	.16	....	....	.03	....	....	....	.22	.27	....	....	.06	.19	.01	....	.04
9.87	....	....	.16	15.82	....	....	.40	27.70	....	....	.64	17.43	....	....	.30	12.34	.01	....	.24
2.76	....	....	.35	21.04	....	....	.23	24.78	....	....	.28	67.48	....	....	1.14	31.92	.02	.05	.40
....	....	....	....	.16	....	....	.01	....	....	....	.12	1.07	....	....	.06	1.15	....	.01	.03
1.64	....	....	.01	1.14	....	....	.02	....	....	....	....	2.86	....	....	.07	1.24	....	....	.02
4.11	.82	....	.60	9.62	....	....	.88	1.46	....	....	.38	5.90	....	....	.49	7.18	.05	.11	.52
4.11	....	....	.36	3.59	.32	.16	.50	....	....	....	.27	4.47	.09	....	.58	3.60	.16	.06	.40
1.64	....	....	.03	1.14	....	....	.09	....	....	....	....	.80	....	....	.05	.98	.01	....	.06
7.57	....	....	.47	19.74	....	....	.19	30.61	....	....	.77	41.02	.09	....	.58	21.68	.05	....	.29
.82	....	....	.07	.16	....	.16	.03	....	....	....	....	....	....	....	....	.04	....	.01	.00
.82	....	....	.01	....	....	....	....	....	....	....	....	.27	....	....	.01	.20	.01	....	.01
3.22	....	....	.49	2.94	....	....	.20	2.92	....	....	.20	5.36	....	.18	.23	3.76	.02	.05	.19
.82	....	....	.45	....	....	....	....	....	....	....	....	.09	....	.09	.00	.07	....	.02	.01
....	....	....	....	.16	....	....	.01	....	....	....	....	.09	....	....	.00	.26	....	.07	.01
.82	....	....	.09	.49	.16	....	.06	....	....	1.46	.13	.27	....	.09	.03	.64	.21	.13	.11
....	....	....	....	.33	....	....	.02	....	....	....	....	.36	....	....	.03	.22	.02	....	.03
....	....	....	....	4.08	.48	....	.26	2.92	....	....	.25	1.52	.18	....	.09	2.02	.26	....	.12
....	....	....	....	2.12	.48	....	.14	....	....	....	.22	.45	.18	....	.01	1.05	.26	....	.08
....	....	....	....	3.43	....	....	.07	2.92	....	....	.14	.89	....	....	.01	.83	....	....	.02
....	....	....	....	.16	....	....	.03	....	....	....	....	.09	....	....	.02	.12	....	....	.01

TABLE No. 76.—*Admissions to sick report, discharges, deaths, and noneffectiveness, at home stations, placed in comparison with the same*

Serial Nos.	International classification.	Causes of admission to sick report.	United States (at home).				Alaska.				Panama Canal Zone.			
			Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
313–319	127	Diseases of the male genital organs (non-venereal)	4.73			0.14	1.75			0.02	7.53			0.24
322–323	143	Furuncle and carbuncle	13.62			.23	7.01			.07	23.84			.36
324–325	144	Acute abscess and cellulitis	8.94	.03		.26	3.51			.04	11.29			.26
352–357	146	Diseases of the bones	1.76	.05	0.02	.10	.88			.08	2.51			.21
358–360	147	Diseases of the joints	3.69	.13		.25	1.75			.01	11.29	3.76		.62
367	149g	Flat foot	2.23	.90		.20					12.55	11.29		.52
372	150	Congenital malformations	4.24	.02		.11	5.26			.10	1.25			.16
373–374	154	Senility		.02										
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	2.65			.04	2.63			.05	2.51			.07
379	189Ba	Under observation, undiagnosed and unknown	1.24	.05	.05	.08	.88		0.88	.05				
380	189Bb	Malingering	.32			.01					1.25			.01
		For diseases not enumerated above	61.15	1.16	.10	1.91	57.84	0.88		1.18	81.56	3.76		2.92
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[1]												
426–434	155–163	Suicides, all	.13		.55				.88					
435	164	Poisoning by food	1.16											
436	165a	Venomous bites and stings	1.24				.88							
437	165b	Other poisoning (deleterious gases excepted)	.49		.10									
438	166	Conflagration	.02											
439	167	Burns (conflagrations excepted)	3.98	.03			8.76				2.51			
440	168	Absorption of deleterious gases	.03		.02									
442	169	Drowning, accidental			.30				.88				5.02	
443	170	Traumatism by firearms (other than specified)	2.38	.30	.13		.88		.88		6.27	1.25		
444	170a	Shot by sentry or guard	.03		.03						1.25			
445	171	Traumatism by cutting or piercing instruments	10.80	.08	.02		14.02				26.35			
446	172	Traumatism by fall	39.31	.50	.23		53.46				30.11	1.25		
447	173	Traumatism in mines and quarries	.02											
448	174	Traumatism by machines	1.31	.07			1.75							
449	175	Traumatism by other crushing	7.23	.05	.55		4.38				2.51			
450	176	Injuries by animals	13.61	.13	.03		4.38				2.51			
452	178	Effects of excessive cold	.42	.05	.02		2.63							
453	179	Effects of heat	1.49		.02						3.76			
454	180	Effects of lightning	.03		.05									
455	181	Effects of electricity	.03		.02									
456–458	182–4	Homicides, all	.08		.25									
459	185	Fractures, causes not specified	.02											
460	186	Other external violence	46.45	.18	.02		48.20	.88			32.62			
425	186	Secondary results of injury	1.69	.12			1.75							
462–466		Killed or wounded in action		.02										
462		By bullet		.02										
465		By bolo, kris, etc												
466		By other weapon												

[1] Noneffectiveness for individual external causes not tabulated.

xpressed in ratios per 1,000 of mean strength, for American troops (enlisted men) on duty ata for those serving at distant stations, year 1913—Continued.

China.				Hawaii.				Army transports.				Philippines.				Total American Army.			
Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
10.69	....	....	0.33	5.06	....	....	0.11	1.46	....	....	0.02	3.40	....	....	0.13	4.62	....	....	0.14
15.62	....	....	.23	35.08	....	....	.62	2.92	....	....	.05	24.49	....	....	.47	16.70	....	....	.29
15.62	....	....	.27	16.15	....	....	.45	1.46	....	....	.04	16.18	....	....	.52	10.48	0.02	....	.30
.82	....	....	.00	3.10	....	....	.20	1.46	....	....	.21	1.52	....	....	.10	1.81	.01	0.01	.11
3.29	....	....	.15	4.24	0.48	....	.36	1.46	....	....	.46	2.15	0.18	....	.18	3.54	.20	....	.25
.....	.....	.....	.....	2.28	.64	....	.12	.....	.....	.....	.18	.36	.....	.....	.02	1.99	.82	....	.17
4.11	....	....	.05	2.28	....	....	.11	.....	.....	.....	.....	2.59	.....	.....	.08	3.81	.01	....	.11
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.01	.....	.....
.82	....	....	.00	1.31	....	....	.02	.....	.....	.....	.....	5.27	.....	.....	.07	2.86	....	....	.05
.....	.....	.....	.....	2.45	....	.16	.18	.....	.....	.....	.34	1.34	.....	.....	.05	1.30	.04	.06	.09
.....	.....	.....	.....	1.31	....	....	.17	.....	.....	.....	.04	.36	.....	.....	.01	.40	....	....	.02
60.86	....	....	1.33	63.95	.96	.16	2.04	64.14	....	....	3.40	75.62	.79	....	2.42	63.54	1.09	.09	2.00
.....	....	3.29	.....	.16	.....	.16	.....	.....	.....	.....	.....	.09	.....	.26	.....	.12	.....	.51	.....
1.64	....	....	.....	1.14	.....	....	.....	.....	.....	.....	.....	15.10	.....	.....	.....	3.06	.....	.....	.....
.....	.....	.....	.....	.65	.....	.....	.....	.....	.....	.....	.....	2.23	.....	.....	.....	1.29	.....	.....	.....
.....	.....	.....	.....	.82	.....	.48	.....	.....	.....	.....	.....	.63	.....	.....	.....	.51	.....	.11	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.01	.....	.....	.....
5.76	....	....	.....	3.26	.....	.....	.....	4.37	.....	.....	.....	4.74	.....	.09	.....	4.11	.02	.01	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.09	.....	.....	.....	.04	.....	.01	.....
.....	.....	.....	.....	.....	.....	.64	.....	.....	.....	.....	.....	.....	.....	.18	.....	.....	.....	.35	.....
1.64	....	....	.....	1.63	.16	.32	.....	.....	.....	.....	.....	1.43	.....	.....	.....	2.18	.24	.13	.....
.....	.....	.....	.....	.16	.....	.....	.....	.....	.....	.....	.....	.27	.....	.....	.....	.09	.....	.02	.....
13.16	....	....	.....	17.62	.16	....	.....	1.46	.....	.....	.....	12.87	.....	.....	.....	11.76	.07	.01	.....
66.61	....	1.64	.....	66.72	.....	.....	.....	2.92	.....	.....	.....	35.30	.26	.....	.....	41.04	.42	.20	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.01	.....	.....	.....
.....	.....	.....	.....	1.47	.....	.....	.....	.....	.....	.....	.....	.80	.....	.....	.....	1.21	.05	.....	.....
2.47	....	....	.....	5.06	.....	.....	.....	2.92	.....	.....	.....	9.21	.....	.79	.....	7.14	.04	.51	.....
5.76	....	....	.....	14.68	.....	.....	.....	.....	.....	.....	.....	8.94	.09	.....	.....	12.56	.11	.02	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.35	.04	.01	.....
.....	.....	.....	.....	2.77	.....	.....	.....	.....	.....	.....	.....	2.86	.....	.09	.....	1.75	.....	.02	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.02	.....	.04	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.02	.....	.01	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.18	.....	.06	.....	.21	.....
.....	.....	.....	.....	.16	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.02	.....	.....	.....
58.39	....	....	.....	56.77	.32	....	.....	16.04	.....	.....	.....	48.80	.18	.26	.....	47.37	.20	.05	.....
.82	....	....	.....	1.96	.....	.....	.....	.....	.....	.....	.....	1.43	.09	.....	.....	1.63	.10	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.89	.09	.26	.....	.12	.02	.04	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.36	.09	.18	.....	.05	.02	.02	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.45	.....	.09	.....	.06	.....	.01	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.09	.....	.....	.....	.01	.....	.....	.....

TABLE No. 76.—*Admissions to sick report, discharges, deaths, and noneffectiveness at home stations, placed in comparison with the sam*

Serial Nos.	International classification.	Causes of admission to sick report.	United States (at home).				Alaska.				Panama Canal Zone			
			Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
		DISEASES AND INJURIES GROUPED.												
.....		General diseases.....	178.43	4.18	0.90	8.76	106.92	1.75	....	2.63	406.52	5.02	....	12.61
1-19		Epidemic diseases	64.40	.07	.20	1.69	42.07	....	....	.59	184.44	.....	....	6.24
20-59		Other general diseases.....	114.03	4.12	.70	7.07	64.86	1.75	....	2.05	222.08	5.02	....	6.37
		Diseases of the nervous system and organs of special sense.	26.37	4.36	.28	2.19	19.28	7.01	....	1.81	45.17	10.04	....	2.33
60-74		Of the nervous system.....	13.24	3.90	.25	1.66	12.27	6.13	....	1.25	20.08	7.53	....	1.20
75		Of the eye and its annexa.....	7.95	.33	....	.31	3.51	....	....	.36	13.80	1.25	....	.90
76		Of the ear and its annexa.....	5.18	.13	.03	.21	3.51	.88	....	.21	11.29	1.25	....	.23
77-85		Diseases of the circulatory system.....	15.45	.65	.32	.90	12.27	....	....	.47	35.13	2.51	....	2.39
86-98		Diseases of the respiratory system.....	48.37	.33	.43	1.20	41.19	....	....	.75	43.91	.....	....	1.23
99-118		Diseases of the digestive system.....	132.16	.42	.40	2.77	98.16	....	....	2.26	89.08	1.25	1.25	3.98
119-127		Diseases of the genitourinary system.....	8.96	.53	.23	.48	5.26	....	0.88	.16	11.29	2.51	....	.30
142-145		Diseases of the skin and cellular tissue..	46.35	.13	....	1.09	26.29	....	....	.30	69.01	.....	....	1.68
146-149		Diseases of the organs of locomotion.....	22.95	1.23	.02	.96	31.55	....	....	.51	38.90	15.06	....	1.84
150		Malformations, etc....	4.24	.02	....	.11	5.26	....	....	.10	1.25	.....	....	.16
154		Diseases, results of old age.....	.....	.02	....	....	....	....	....	....	....	....	....	....
189		Ill-defined diseases....	4.65	.05	.05	.14	7.89	....	.88	.12	5.02	.....	....	.08
		Total for disease	487.94	11.92	2.62	18.61	354.08	8.76	1.75	9.13	745.29	36.39	1.25	26.61
155-186		External causes.....	131.96	1.53	2.33	4.33	141.10	.88	2.63	4.49	107.90	2.51	5.02	3.61
		Total for disease and external causes.....	619.90	13.45	4.95	22.94	495.18	9.64	4.38	13.62	853.20	38.90	6.27	30.23

xpressed in ratios per 1,000 of mean strength, for American troops (enlisted men) on duty luta for those serving at distant stations, year 1913—Continued..

China.				Hawaii.				Army transports.				Philippines.				Total American Army.			
Admission.	Discharges.	Deaths.	Noneffective.	Admission.	Discharges.	Deaths.	Noneffective.	Admission	Discharges	Deaths.	Noneffective.	Admission.	Discharges.	Deaths.	Noneffective.	Admission.	Discharges.	Deaths	Noneffective.
371.71	1.64	2.47	13.75	166.23	1.76	1.28	7.60	195.34	..	1.46	21.79	364.85	7.12	1.67	15.07	207.62	4.31	1.04	9.69
107.73	....	1.64	3.15	51.22	.....	.....	1.59	123.91	..	.....	2.80	181.18	.09	.79	4.56	81.61	.06	.28	2.14
263.98	1.64	.82	10.60	115.01	1.76	1.28	6.01	71.43	..	1.46	18.99	183.68	7.03	.88	10.52	126.02	4.25	.76	7.55
26.32	2.47	....	1.22	29.69	4.63	.16	1.76	27.70	..	....	12.31	34.50	5.19	....	1.67	27.84	4.53	.22	2.16
17.27	2.47	....	.98	16.97	4.15	16	1.41	16.04	..	....	11.73	17.16	5.10	....	1.19	14.20	4.10	.20	1.64
2.47	....	....	.18	9.62	.32	....	.21	5.83	..	....	.28	8.94	....	....	.28	8.11	.28	....	.31
6.58	....	....	.06	3.10	.16	....	.14	5.83	..	....	.30	8.40	.09	....	.20	5.53	.15	.02	.21
27.96	....	....	.97	20.72	.64	.16	.98	8.75	..	....	.91	25.74	.18	.35	1.16	17.56	.58	.29	.95
55.92	....	1.64	2.08	66.07	.16	....	1.53	33.53	..	....	1.13	47.64	.18	.18	1.28	49.45	.28	.37	1.24
172.70	.82	....	3.50	116.31	.32	.32	3.25	129.74	..	....	3.46	187.96	.18	.26	4.26	138.38	.38	.37	3.04
12.34	....	....	.44	14.36	.64	....	.57	8.75	..	1.46	.55	7.51	.18	.09	.36	9.19	.49	.21	.46
55.92	....	....	.93	78.47	.....	.....	1.77	16.04	..	....	.50	75.97	.09	....	1.91	52.72	.11	....	1.25
27.14	....	....	.73	25.77	1.28	....	1.24	7.29	..	....	1.37	22.43	.35	....	.91	23.30	1.20	.01	.98
4.11	....	....	.05	2.28	.....	....	.11	.....	..	.....	.....	2.59	.....	....	.08	3.81	.01	....	.11
.....	.....	.....	.....	.....	.....	.....	.....	.....	..	.....	.....	.....	.....	.....	.....	.....	.01	.....	.....
.82	....	....	.00	6.69	.....	.16	.10	34.99	..	....	.65	7.06	.....	....	.13	5.39	.04	.06	.16
754 93	4.93	1.11	23.68	529.59	9.43	2.08	19.23	462.10	..	2.92	42.67	776.28	13.44	2.55	26.84	535.26	11.93	2.57	20.02
156.25	...	4.93	3.23	175.04	.64	1.60	4.95	27.70	..	....	2.67	145.78	.70	2.11	4.08	136.52	1.31	2.29	4.31
911.18	4.93	9.05	26.91	701.63	10.07	3.67	24.18	489.80	..	2.92	45.35	922.06	14.14	4.66	30.91	671.78	13.24	4.86	24.33

TABLE No. 77.—*Total movement of sick for United States Army, enlisted men at home, compared with that of foreign armies.*

	United States (continental), American troops, enlisted men, 1913.		British (United Kingdom), 1912.		Prussian, 1911.		Bavarian, 1911.		Austro-Hungarian, 1911.		Russian, 1910.	
Mean strength	59,608		107,582		554,824		66,915		.....		1,227,100	
	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.
Admitted to sick report, total	36,951	30,059	.....	37,267	323,436	144,351	28,460	14,863	.....	.....	542,410	510,523
Ratio per 1,000 of mean strength	619.9	504.28	.....	346.4	583.0	260.2	425.3	222.1	830.9	398.5	442.0	416.0
Disposed of, all causes	36,038	.....	.....	.....	324,354	.....	28,394	.....	.....	.....	541,814	.....
Ratio per 1,000 of mean strength	604.58	.....	.....	.....	583.9	.....	424.3	.....	.....	.....	442.0	.....
Died of all causes	298	.....	288	.....	1,092	.....	129	.....	.....	.....	5,070	.....
Ratio per 1,000 of mean strength	4.95	.....	2.34	.....	2.0	.....	1.9	.....	3.0	.....	4.13	.....
Ratio per 1,000 of all disposed of	8.27	.....	.....	.....	3.4	.....	4.5	.....	2.51	.....	.81	.....
Died of disease	158	.....	207	.....	678	.....	81	.....	.....	.....	4,415	.....
Ratio per 1,000 of mean strength	2.62	.....	1.92	.....	1.22	.....	1.21	.....	2.09	.....	3.6	.....
Died of injury	140	.....	81	.....	414	.....	48	.....	.....	.....	655	.....
Ratio per 1,000 of mean strength	2.33	.....	.....	.....	7.5	.....	.72	.....	.91	.....	.53	.....
Died when on sick report or present with command	175	.....	.....	.....	733	.....	89	.....	.....	.....	.....	.....
Ratio per 1,000 of mean strength	2.91	.....	.....	.....	1.3	.....	1.33	.....	.....	.....	.....	.....
Ratio per 1,000 of all disposed of	4.86	.....	.....	.....	2.26	.....	3.13	.....	.....	.....	.....	.....
Died when not on sick report or absent from command	123	.....	.....	.....	359	.....	40	.....	.....	.....	.....	.....
Accidental deaths	90	.....	39	.....	182	.....	25	.....	.....	.....	387	.....
Suicides	33	.....	42	.....	232	.....	23	.....	.....	.....	268	.....
Returned to duty	34,413	.....	.....	.....	302,984	.....	26,208	.....	.....	.....	496,870	.....
Ratio per 1,000 of all disposed of	954.91	.....	.....	.....	935.4	.....	923.0	.....	868.1	.....	917.1	.....
Otherwise disposed of	1,327	.....	.....	.....	20,278	.....	2,057	.....	.....	.....	40,529	.....
Ratio per 1,000 of all disposed of	36.82	.....	.....	.....	62.6	.....	923.0	.....	129.3	.....	74.8	.....
Total days lost on account of sickness, all causes	499,044	455,468	.....	767,656	5,126,754	.....	527,015	.....	.....	.....	.....	.....
Constantly noneffective on account of sickness, all causes	1,367.24	1,247.86	.....	2,097.42	14,045.9	.....	1,443.88	.....	.....	.....	.....	.....
Ratio per 1,000 of mean strength	22.94	20.93	26.72	19.5	25.32	.....	21.58	.....	.....	.....	.....	.....
Average days of treatment:												
For each soldier of mean strength	8.37	7.64	.....	7.14	9.2	.....	7.9	.....	13.3	.....	10.5	.....
For each case of sickness	13.51	15.15	.....	20.6	15.4	.....	17.9	.....	15.5	.....	23.8	.....
Discharges for disability, all causes	810	.....	1,154	.....	23,480	.....	3,315	.....	.....	.....	40,529	.....
Ratio per 1,000 of mean strength	13.45	.....	9.37	.....	42.3	.....	49.5	.....	.....	.....	33.0	.....
Total losses per 1,000 of mean strength	18.4	.....	11.71	.....	44.3	.....	51.4	.....	.....	.....	37.13	.....

	Spanish, 1910.		Dutch, 1910.		French (France), 1910.		Japanese, 1909.		Portuguese, 1909.	
Mean strength	121,076		23,407		443,308		196,764		29,159	
	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.	Total.	Hospital.
Admitted to sick report, total	123,177	53,051	29,970	14,703	899,218	320,650	168,438	29,361	22,803	19,220
Ratio per 1,000 of mean strength	1,017.3	438.1	1,280.0	628.0	1,982.0	677.0	856.3	149.26	782.0	659.0
Disposed of, all causes	123,525		30,050				169,550		23,011	
Ratio per 1,000 of mean strength	1,020.23		1,283.80				861.96		789.16	
Died of all causes	566		52		1,588		703		69	
Ratio per 1,000 of mean strength	4.67		2.22		3.01		3.57		2.99	
Ratio per 1,000 of all disposed of	4.39		1.73				4.15		3.0	
Died of disease	548		48		1,337		563			
Ratio per 1,000 of mean strength	4.52		2.05		2.53		2.86			
Died of injury	18		4		251		140			
Ratio per 1,000 of mean strength	.13		.17		.47		.71			
Died when on sick report or present with command	561				1,327		571			
Ratio per 1,000 of mean strength	4.61				2.52		2.9			
Ratio per 1,000 of all disposed of	4.54						3.37			
Died when not on sick report or absent from command	5				261		132			
Accidental deaths	12		1		165		38			
Suicides	6		3		86		102			
Returned to duty	113,176		27,515				161,793		21,414	
Ratio per 1,000 of all disposed of	916.2		915.6				954.25		930.0	
Otherwise disposed of	9,806		2,489				7,186		1,528	
Ratio per 1,000 of all disposed of	79.4		82.8				42.38		66.0	
Total days lost on account of sickness, all causes	1,394,528			213,220	6,259,998	4,904,660	2,223,860		280,534	
Constantly noneffective on account of sickness, all causes	3,820.62			584.16	17,150.68	13,437.43	6,092.77		768.59	
Ratio per 1,000 of mean strength	31.56			24.95	32.58	27.71	30.97		26.36	
Average days of treatment:										
For each soldier of mean strength	11.5			9.1	11.9	10.1	11.31		9.62	
For each case of sickness	24.8			14.5	17.5	15.2	12.78		12.3	
Discharges for disability, all causes	4,075				21,400		5,298			
Ratio per 1,000 of mean strength	33.5				40.67		26.94			
Total losses per 1,000 of mean strength	38.17				43.68		30.51			

TABLE No. 78.—*A comparison of the admission and death rates of the United States Army enlisted men at home for certain special diseases with those of foreign armies.*

Diseases.	Admission rates per 1,000 of mean strength.										Death rates per 1,000 mean strength.									
	United States, continental (excluding Alaska), 1913.	British, 1912.	Prussian, 1911.	Bavarian, 1911.	Austro-Hungarian, 1911.	Russian, 1910.	Spanish, 1910.	Dutch, 1910.	French, 1910.	Japanese, 1909.	United States, continental (excluding Alaska), 1913.	British, 1912.	Prussian, 1911.	Bavarian, 1911.	Austro-Hungarian, 1911.	Russian, 1910.	Spanish, 1910.	Dutch, 1910.	French, 1910.	Japanese, 1909.
1. Alkoholismus acutus, including delirium tremens	13.05	0.5	0.07	0.24	.....	0.07	0.18	0.256	0.23	0.01	0.05	0.03	.....	.....	.....	.....	.....	0.042	0.003	.....
2. Appendicitis, typhlitis, and perityphlitis	7.01	(1)	4.8	4.5	.....	2.35	.21	(1)	2.18	1.04	.13	(1)	0.11	0.21	.....	0.10	0.01	(1)	.07	0.04
3. Bronchitis acuta	27.70	[2] 11.7	35.3	29.7	93.8	23.1	35.87	54.6	85.01	43.97	.....	.03	.....	.....	0.02	.....	.09	.....	.01	.....
4. Cholera Asiatica	.....	.1	.....	.....	.....	.44	.....	.....	.....	.01	.....	.04	.....	.....	.....	.14	.....	.....	.....	.01
5. Cholera nostras	.....	.....	.....	.01	.....	.02	.....	.....	.003	.01	.....	.....	.....	.01	.....	.002	.....	.....	.001	.01
6. Diphtheria et croup	.30	.4	1.6	.36	.1	.18	.01	.128	1.14	.02	.....	.01	.05	.....	.....	.01	.....	.....	.02	.01
7. Dysenteria	1.09	2.3	2.7	.01	.3	.67	.54	.....	.59	.53	.02	.08	.....	.....	.01	.05	.008	.....	.003	.08
8. Erysipelas	.69	.3	1.1	1.3	1.4	3.69	3.70	2.47	1.37	.10	.....	.01	.01	.01	.01	.09	.008	.....	.01	.01
9. Febris intermittens (malaria)	7.31	32.1	.03	.....	2.1	28.8	13.93	2.00	.71	26.28	.....	.08	.....	.....	.....	.02	.04	.....	.....	.05
10. Febris recurrens	.....	(1)	.....	.....	.....	.06	.10	.....	.....	.....	.....	(1)	.....	.....	.....	.002	.....	.....	.....	.....
11. Fractura ossium	12.60	(1)	7.5	5.9	2.6	1.8	1.40	(1)	4.67	2.16	.33	(1)	.04	.03	.01	.02	.008	(1)	.12	.03
12. Gonorrhea	49.46	34.2	13.1	11.3	30.0	24.3	30.10	16.8	16.56	10.55	.....	.01	.....	.....	.....	.....	.....	.....	.....	.....
13. Hernia	3.49	3.1	2.6	2.1	6.4	2.4	2.58	4.1	9.08	.77	.07	.....	.....	.....	.01	.002	.....	.....	.007	.01
14. Influenza	15.15	11.2	13.4	15.1	4.6	33.5	41.18	22.00	8.60	2.92	.....	.01	.01	.....	.....	.07	.23	.....	.08	.....
15. Insolatio (Hitzschlag coup de chaleur)	.05	1.1	.35	.57	.1	.03	.14	.042	.16	2.09	.02	.07	.01	.....	.....	.....	.....	.....	.....	.09
16. Luxationes articulorum	2.78	(1)	1.4	1.4	.9	.82	.76	(1)	1.63	.76	.02	(1)	.....	.....	.....	.....	.....	(1)	.....	.....
17. Meningitis cerebro spinalis epidemica	.54	.1	.03	.07	.....	.005	.15	.....	.54	.14	.18	.04	.01	.01	.....	.003	.11	.....	.12	.07
18. Morbilli	7.67	.9	.39	.51	.5	.38	5.62	.085	14.55	1.30	.18	.01	.....	.....	.....	.01	.14	.....	.10	.....
19. Parotitis epidemica	8.29	.4	.86	.91	1.4	4.1	6.15	.256	15.68	.33	.....	.....	.....	.....	.....	.001	.008	.....	.007	.....
20. Pleuritis	2.48	(1)	3.2	2.5	.4	10.1	2.37	(1)	9.28	15.30	.07	(1)	.04	.03	.09	.17	.06	(1)	.10	.14
21. Pneumonia crouposa sive lobaris	2.35	[3] 2.4	4.4	4.6	3.6	4.59	2.86	3.67	2.65	5.18	.32	[3] .27	.24	.15	.20	.33	.23	.29	.19	.30
22. Rheumatismus articulorum	7.65	5.4	7.4	7.4	14.2	6.26	23.94	10.8	19.98	6.39	.....	.01	.02	.03	.01	.01	.03	.042	.01	.01
23. Scarlatina	.05	.8	.77	.90	.4	.15	.20	.51	3.68	.....	.....	.....	.02	.03	.01	.01	.008	.....	.07	.....
24. Scorbutus	.....	.....	.01	.....	4.1	.66	.....	.....	.....	.....	.....	.....	.....	.....	.....	.01	.....	.....	.....	.....
25. Syphilis	20.99	28.0	5.4	4.4	16.3	15.1	11.91	4.14	5.28	6.77	.07	.01	.....	.....	.....	.01	.01	.....	.003	.....

26. Trachoma	.27	.0	.19	.....	3.7	5.3	.02	.....	.04	4.70	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
27. Tuberculosis pulmonum	2.62	1.5	1.3	1.3	1.6	2.09	5.81	4.82	4.73	3.85	.27	.19	.11	.10	.43	.55	.54	.34	.33	.16
28. Tuberculosis cetororum organorum	.45	.4	.48	.19	3.1	1.42	.35	1.1	2.02	1.26	.13	.05	.08	.04	.14	.14	.04	.042	.33	.33
29. Typhus abdominalis	.05	1.1	.45	.07	2.0	5.2	7.03	.51	2.38	5.47	.....	.19	.06	.01	.22	.75	1.20	.128	.31	.55
30. Typhus exanthematicus	.....	.0	.....	.....	.....	.17	.....	.....	.....	.01	.....	.....	.....	.....	.....	.02	.....	.....	.....	.....
31. Ulcus molle	15.38	(1)	1.5	.87	8.9	8.0	31.27	(1)	1.49	7.69	.....	(1)	.....	.....	.....	.....	.....	(1)	.....	.....
32. Variola	.03	.1	.....	.....	.....	.18	.46	.....	.02	.01	.....	.02	.....	.....	.....	.02	.01	.....	.....	.....
33. Morbi auris	5.18	7.7	11.3	11.8	18.6	6.3	9.10	14.48	8.77	8.33	.03	.02	.03	.03	.01	.20	.03	.....	.02	.01
34. Morbi cordis	1.42	4.0	3.5	2.6	6.1	4.1	5.34	3.1	3.27	1.24	.24	.16	.02	.03	.05	.05	.10	.128	.04	.05
35. Morbi cutis	20.05	25.5	16.8	7.9	183.8	39.32	44.09	147.4	16.03	152.65	.....	.....	.....	.....	.04	.05	.03	.....	.001	.02
36. Morbi mentis	2 92	.7	1.5	1.6	1.6	.57	.71	1.96	.59	.34	.....	.01	.....	.01	.....	.01	.....	.....	.01	.....
37. Morbi oculi	7.95	6.0	11.2	6.8	30.8	6.4	15.25	21.7	5.92	27.01	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
38. Morbi systemat urin et sexual (excluding venereic et syphilis)	8.96	10.1	6.5	6.5	14.3	8.2	9.34	10.16	9.43	8.62	.23	.08	.03	.03	.05	.09	.02	.085	.07	.05

[1] Diseases not reported in table.

[2] All; acute not tabulated separately.

[3] All pneumonia; croupous not tabulated separately.

TABLE NO. 79.—*Showing the most important diseases by departments in the United States (continental, excluding Alaska), 1918—enlisted men.*

ADMISSIONS, ABSOLUTE NUMBERS.

Diseases.	Eastern Department.	Central Department.	Southern Department.	Western Department.	Recruit depots.	Independent stations.	General hospitals.	Second tactical division.	Cavalry division, Mexican border.	Total.	Races.	
											White.	Colored.
1. Alkoholismus, acutus, including delirium tremens.	345	62	51	126	54	36	24	76	4	778	773	5
2. Appendicitis, typhlitis, perityphlitis	125	37	45	65	39	9	19	67	12	418	413	5
3. Bronchitis acuta	379	194	146	262	374	41	16	190	49	1,651	1,600	51
4. Cholera Asiatica												
5. Cholera nostras												
6. Diphtheria	9	2		5	1		1			18	18	
7. Dysenteria	18	3	6	11	1	4	1	16	5	65	60	5
8. Erysipelas	9	4	4	9	11	2		1	1	41	38	3
9. Febris intermittens (malaria)	183	22	26	56	70	8	11	57	3	436	434	2
10. Febris recurrens												
11. Fractura ossium	272	72	63	136	61	36	3	78	30	751	729	22
12. Gonorrhea	1,091	242	220	448	394	42	16	413	82	2,948	2,846	102
13. Hernia	53	18	13	43	42	4	4	21	10	208	200	8
14. Influenza	260	186	86	177	45	58	13	66	12	903	886	17
15. Insolatio (Hitzschlag coup de chaleur)	2							1		3	3	
16. Luxationes articulorum	64	28	9	19	10	2	1	26	7	166	160	6
17. Meningitis cerebrospinalis, epidemica	2	3	5	2	17		1	1	1	32	32	
18. Morbilli	161	14	23	80	143		3	24	9	457	450	7
19. Parotitis epidemica	108	28	31	97	164	1	1	51	13	494	454	40
20. Pleuritis	29	15	13	26	16	5	2	33	9	148	144	4
21. Pneumonia crouposa sive lobaris	39	11	9	25	34	2	1	7	12	140	131	9
22. Rheumatismus articulorum	128	36	42	98	62	9	8	62	11	456	446	10
23. Scarlatina	2			1						3	3	
24. Scorbutus												
25. Syphilis	425	137	117	173	118	25	19	220	17	1,251	1,215	36
26. Trachoma	1		1	4	10					16	16	
27. Tuberculosis pulmonum	52	13	14	32	14	4	5	19	3	156	150	6
28. Tuberculosis ceterorum organorum	6	2	2	7	4		3	2	1	27	24	3
29. Typhus abdominalis		1		1	1					3	3	
30. Typhus exanthematicus												
31. Ulcus molle	361	37	98	46	95	10	3	239	28	917	875	42
32. Variola	2									2	2	
33. Morbi auris	67	29	35	47	37	1	1	81	11	309	303	6
34. Morbi cordis	29	9	6	13	16	1	2	8	1	85	74	11
35. Morbi cutis	396	102	79	230	209	24	6	126	23	1,195	1,172	23
36. Morbi mentis	49	13	7	39	31	5	5	23	2	174	172	2
37. Morbi oculi	160	43	37	63	74	15	3	62	17	474	458	16
38. Morbi systemat., urin. et sexual (excluding venerie et syphilis)	161	56	45	70	108	18	12	44	20	534	519	15

Diseases.	Eastern Department.	Central Department.	Southern Department.	Western Department.	Recruit depots.	Independent stations.	General hospitals.	Second tactical division.	Cavalry division, Mexican border.	Total.	Races.	
											White.	Colored.
1. Alkoholismus, acutus, including delirium tremens	16.9	10.9	10.7	11.9	11.9	23.5	53.3	8.3	1.7	13.1	13.3	2.9
2. Appendicitis, typhlitis, perityphlitis	6.1	6.5	9.4	6.2	8.4	5.9	42.2	7.3	5.0	7.0	7.1	2.9
3. Bronchitis acuta	18.5	34.0	30.6	24.8	80.7	26.7	35.6	20.8	20.6	27.7	27.6	30.1
4. Cholera Asiatica	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. Cholera nostras	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. Diphtheria	.4	.4	.....	.5	.2	.....	2.2	.....	.....	.3	.3	.....
7. Dysenteria	.9	.5	1.3	1.0	.2	2.6	2.2	1.8	2.1	1.1	1.0	2.9
8. Erysipelas	.4	.7	.8	.9	2.4	1.3	.....	.1	.4	.7	.7	1.8
9. Febris intermittens (malaria)	8.9	3.9	5.4	5.3	15.1	5.2	24.4	6.2	1.3	7.3	7.5	1.2
10. Febris recurrens	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. Fractura ossium	13.3	12.6	13.2	12.9	13.2	23.5	6.7	8.5	12.7	12.6	12.6	13.0
12. Gonorrhea	53.3	42.5	46.1	42.5	84.9	27.4	35.6	45.2	34.5	49.5	49.1	60.1
13. Hernia	2.6	3.2	2.7	4.1	9.1	2.6	8.9	2.3	4.2	3.5	3.5	4.7
14. Influenza	12.7	32.6	18.0	16.8	9.7	37.8	28.9	7.2	5.0	15.1	15.3	10.0
15. Insolatio (Hitzschlag coup de chaleur)	.....	.....	.....	.....	.....	.....	.....	.1	.....	.1	.1	.....
16. Luxationes articulorum	3.1	4.9	1.9	1.8	2.2	1.3	2.2	2.8	2.9	2.8	2.8	3.5
17. Meningitis cerebrospinalis, epidemica	.1	.5	1.0	.2	3.7	.....	2.2	.1	.4	.5	.6	.....
18. Morbilli	7.9	2.5	4.8	7.6	30.8	.....	6.7	2.6	3.8	7.7	7.8	4.1
19. Parotitis epidemica	5.3	4.9	6.5	9.2	35.4	.7	2.2	5.6	5.5	8.3	7.8	23.6
20. Pleuritis	1.4	2.6	2.7	2.5	3.5	3.3	4.4	3.6	3.8	2.5	2.5	2.3
21. Pneumonia crouposa sive lobaris	1.9	1.9	1.9	2.4	7.3	1.3	2.2	.8	5.0	2.3	2.3	5.3
22. Rheumatismus articulorum	6.3	6.3	8.8	9.3	13.4	5.9	17.8	6.8	4.6	7.6	7.7	5.9
23. Scarlatina	.1	.....	.....	.1	.....	.....	.....	.....	.....	.1	.1	.....
24. Scorbutus	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
25. Syphilis	20.8	24.0	24.5	16.4	25.5	16.3	42.2	24.1	7.1	21.0	21.0	21.2
26. Trachoma	.05	.....	.2	.4	2.2	.....	.....	.....	.....	.3	.3	.....
27. Tuberculosis pulmonum	2.5	2.3	2.9	3.0	3.0	2.6	11.1	2.1	1.3	2.6	2.6	3.5
28. Tuberculosis caterorum organorum	.3	.4	.6	.7	.9	.....	6.7	.2	.4	.5	.4	1.8
29. Typhus abdominalis	.....	.2	.2	.1	.2	.....	.....	.....	.....	.1	.1	.....
30. Typhus exanthematicus	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
31. Ulcus molle	17.6	6.5	20.5	4.4	20.5	6.5	6.7	26.2	11.8	15.4	15.1	24.8
32. Variola	.1	.....	.....	.....	.....	.....	.....	.....	.....	.03	.03	.....
33. Morbi auris	3.3	5.1	7.3	4.5	7.9	.7	2.2	8.9	4.6	5.2	5.2	3.5
34. Morbi cordis	1.4	1.6	1.3	1.2	3.5	.7	4.4	.9	.4	1.4	1.3	6.5
35. Morbi cutis	19.4	17.9	16.6	21.8	45.1	15.7	13.3	13.8	9.7	20.0	20.2	13.6
36. Morbi mentis	2.4	2.3	1.5	3.7	6.7	3.3	11.1	2.5	.8	2.9	3.0	1.2
37. Morbi oculi	7.8	7.5	7.8	6.0	16.0	9.8	6.7	6.8	7.1	8.0	7.9	9.4
38. Morbi syst. emat., urin. et sexual (excluding venerie et syphilis)	7.9	9.8	9.4	6.6	23.3	11.7	26.7	4.8	8.4	9.0	9.0	8.8

TABLE NO. 80.—*Comparative figures: Army, by years, 1909–1913.*

ABSOLUTE NUMBERS (ENLISTED MEN).

Army.	Mean strength.	Admissions to sick report.		Discharges on certificate of disability.		Deaths.		Total losses.		Total days.				Constantly noneffective.			
		From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.		From all causes.		Excluding injuries, venereal disease, vaccinia, and alcoholism.	
										Total.	In hospital.	Total.	In hospital.	Total.	In hospital.	Total.	In hospital.
1913	80,706	54,257	33,459	1,082	865	397	202	1,479	1,067	717,149	659,086	447,061	420,217	1,964.79	1,805.72	1,224.82	1,151.28
1912	78,267	64,487	39,952	1,069	844	381	169	1,450	1,013	862,221	790,213	494,236	459,521	2,356.80	2,159.05	1,350.37	1,255.52
1911	72,748	68,073	39,364	1,011	799	348	181	1,359	980	883,646	798,362	465,853	426,531	2,420.95	2,187.35	1,276.31	1,195.98
1910	71,534	67,940	39,754	1,007	776	320	165	1,327	941	938,210	850,301	483,979	442,868	2,570.41	2,329.59	1,325.97	1,213.34
1909	74,319	79,000	46,809	1,270	918	370	221	1,640	1,139	1,125,333	994,411	597,032	534,125	3,083.10	2,724.41	1,635.79	1,463.36

PROPORTIONATE NUMBERS (ENLISTED MEN).

Army.	Mean strength.	Ratio per 1,000 of mean strength.												Average number of days lost.			
		Admissions to sick report.		Discharges on certificate of disability.		Deaths.		Total losses.		Noneffective from sickness.				From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
		From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.		For each soldier.	For each case.	For each soldier.	For each case.
										Total.	In hospital.	Total.	In hospital.				
1913	80,706	671.78	414.27	13.24	10.59	4.86	2.47	18.10	13.06	24.33	22.36	15.17	14.26	8.88	13.22	5.53	13.36
1912	78,267	823.94	510.46	13.43	10.60	4.79	2.12	18.22	12.72	30.10	27.58	17.25	16.01	11.02	13.37	6.31	12.37
1911	72,748	935.74	541.10	13.85	10.94	4.77	2.48	18.62	13.42	33.28	30.07	17.54	16.06	12.15	12.98	6.40	11.83
1910	71,534	949.76	555.74	14.02	10.81	4.46	2.30	18.48	13.11	35.93	32.57	18.53	16.96	13.12	13.81	6.77	12.17
1909	74,319	1,062.99	629.84	16.84	12.18	4.91	2.93	21.75	15.11	41.48	36.66	22.01	19.69	15.14	14.24	8.03	12.75

TABLE No. 81.—*Ratios per 1,000 of mean strength for "total admissions" and for "case admissions" for enlisted American troops in the Army (as a whole), in the United States (continental), excluding Alaska, and in the Philippine Islands, for the years 1904 to 1911, for disease, external causes, and all causes.*

Year.	Enlisted American troops.	Army.		United States (continental), excluding Alaska.		Philippine Islands.	
		Total admissions.	Case admissions.	Total admissions.	Case admissions.	Total admissions.	Case admissions.
1904	Diseases	1,114	1,002	1,049	951	1,473	1,293
	External causes	241	228	257	242	215	204
	All causes	1,355	1,230	1,306	1,193	1,688	1,497
1905	Diseases	1,058	975	998	921	1,387	1,260
	External causes	238	226	252	239	213	207
	All causes	1,296	1,201	1,250	1,160	1,600	1,467
1906	Diseases	1,053	987	944	879	1,494	1,409
	External causes	224	216	236	226	206	202
	All causes	1,277	1,203	1,180	1,105	1,700	1,611
1907	Diseases	1,005	926	956	885	1,260	1,153
	External causes	213	206	216	208	223	216
	All causes	1,218	1,132	1,172	1,093	1,483	1,369
1908	Diseases	963	891	922	860	1,208	1,097
	External causes	225	217	227	219	232	222
	All causes	1,188	1,108	1,149	1,079	1,440	1,319
1909	Diseases	866	791	822	750	1,156	1,062
	External causes	197	190	202	195	192	185
	All causes	1,063	981	1,024	945	1,348	1,247
1910	Diseases	766	707	715	662	1,048	956
	External causes	184	178	184	178	195	188
	All causes	950	885	899	840	1,243	1,144
1911	Diseases	770	718	726	680	1,028	947
	External causes	166	161	162	157	190	185
	All causes	936	879	888	837	1,218	1,132

INTERNATIONAL MILITARY MEDICAL STATISTICS FOR THE YEAR 1913.

These tables are those agreed upon at the International Commission for the Unification of the Medical Statistics of Armies, held at Budapest in 1894, at Madrid in 1903, and modified by the last meeting held at Berlin in 1907. They are calculated for the United States Army proper (white and colored) and include enlisted men only. Dispositions include cases remaining from last year. Deaths include suicides and accidents. Days lost include those lost this year by cases remaining from last year.

Table I shows in absolute numbers, by divisions, the mean strength of the command, the admissions to quarters, to hospital, and total admissions; the disposition of the sick, total, and the number returned to duty, died, and otherwise disposed of, and the total number of days' sickness.

Table II gives the same data in ratios per 1,000, and also shows the days lost per soldier and per admission.

Table III shows, by arms of service, the mean strength, the total admissions, and those admitted to hospital only, the total dispositions, and the number of those returned to duty, and the number that died.

Table IV gives the same data as Table III by months.

Table V shows for each of the larger garrisons the mean strength, admissions to hospital, total admissions, and the deaths.

Table VI shows for each of the 38 diseases or disease groups agreed upon by the international commission, the number remaining under treatment at the commencement and close of the current year, the admissions and dispositions for the year, the total sick days, and the average number of days per case.

Table VII shows the admissions, by arms of service, for the diseases and disease groups referred to in Table VI.

Table VIII shows the same data as Table VII by months.

Table IX shows deaths by rank, by length of service, and by age.

Table X shows the same data as Table IX for discharges for physical disability.

INTERNATIONAL TABLE I.—*Movement of sick by Army corps (departments)—Absolute numbers (enlisted men).*

	Mean strength.	Admitted sick.			Sick disposed of.				Total days sick.
		Total.	To hospital.	To quarters.	Returned to duty (recovered).	Died.	Otherwise disposed of.	Total.	
United States (excluding Alaska):									
Eastern Department	20,458	12,295	10,235	2,060	11,034	87	138	11,259	113,223
Central Department	5,698	3,545	3,285	260	3,547	37	60	3,644	39,392
Second tactical division	9,133	4,617	2,690	1,927	4,118	31	42	4,191	43,858
Southern Department (excluding Cavalry division)	4,773	3,150	2,680	470	3,244	28	90	3,362	48,821
Cavalry division, Mexican border	2,379	1,163	525	638	791	7	3	801	6,585
Western Department	10,548	5,278	4,546	732	3,630	34	50	3,714	38,372
Independent stations	1,533	905	484	421	833	7	18	858	8,010
Recruit depots	4,636	5,584	5,231	353	5,197	35	384	5,616	63,607
General hospitals	450	414	383	31	2,019	32	542	2,593	137,176
Total	59,608	36,951	30,059	6,892	34,413	298	1,327	36,038	499,044
Alaska	1,141	565	479	86	540	5	16	561	5,672
Canal Zone, Panama	797	680	374	306	533	5	40	578	8,793
Hawaiian Department	6,130	4,301	3,764	537	4,123	23	88	4,234	54,103
China	1,216	1,108	783	325	1,015	11	17	1,043	11,942
Philippine Department	11,188	10,316	9,466	850	9,931	53	330	10,314	126,241
Army transport	686	336	324	12	263	2	2	267	11,354
Army	80,766	54,257	45,249	9,008	50,818	397	1,820	53,035	717,149

NTERNATIONAL TABLE II.—*Movement of sick by Army corps (departments)—Proportionate numbers (enlisted men).*

	In 1,000 of mean strength.			In 1,000 disposed of.			Days lost.	
	Total admissions.	Admissions to hospital.	Deaths.	Returned to duty (recovered).	Died.	Otherwise disposed of.	Per soldier.	Per admission.
nited States (excluding Alaska):								
Eastern Department	600.99	500.29	4.25	980.01	7.73	12.26	5.53	9.21
Central Department	622.15	576.52	6.49	973.38	10.15	16.47	6.91	11.11
Second tactical division	505.53	294.54	3.39	982.58	7.40	10.02	4.80	9.50
Southern Department (excluding Cavalry division)	659.96	561.49	5.87	964.90	8.33	26.77	10.23	15.50
Cavalry division, Mexican border	488.86	220.68	2.94	987.52	8.74	3.75	2.77	5.66
Western Department	500.38	430.98	3.22	977.38	9.16	13.46	3.64	7.27
Independent stations	590.35	315.72	4.57	970.86	8.16	20.98	5.23	8.85
Recruit depots	1,204.49	1,128.34	7.55	925.39	6.23	68.38	13.72	11.39
Total	619.90	504.28	4.95	954.91	8.27	36.82	8.37	13.51
laska	495.18	419.81	4.38	962.57	8.91	28.52	4.97	10.04
anal Zone, Panama	853.20	469.26	6.27	915.81	8.59	75.60	11.03	12.93
awaiian Department	701.63	614.03	3.67	973.78	5.43	20.78	8.83	12.58
hina	911.18	643.91	9.05	973.15	10.55	16.30	9.82	10.78
hilippine Department	922.06	846.09	4.66	962.87	5.14	32.00	11.28	12.24
rmy transports	489.80	472.30	2.92	985.02	7.49	7.49	16.55	33.79
Army	671.78	560.25	4.86	958.13	7.49	34.39	8.88	13.22

NTERNATIONAL TABLE III.—*Movement of sick by arms of service—Army—Enlisted men.*

rms of service.	Absolute numbers.						Proportionate numbers.				
	Mean strength.	Sick admissions.		Sick disposed of.			Per 1,000 of mean strength.			Per 1,000 of sick disposed of.	
		Total.	To hospitals.	Total.	Fit for duty (recovered).	Deaths.	Total sick admissions.	Admissions to hospitals.	Deaths.	Fit for duty (recovered).	Deaths.
fantry	29,000	19,458	15,732	18,969	18,138	139	670.96	542.48	4.79	956	7.33
valry	13,423	9,977	8,168	9,837	9,513	61	743.28	608.51	4.49	967	6.20
ast Artillery	16,478	9,788	8,561	9,506	9,073	92	594.00	519.54	5.52	954	9.68
eld Artillery	4,869	3,919	3,301	3,867	3,729	19	804.89	677.96	3.86	964	4.91
gineers	1,605	957	661	918	863	7	596.26	411.84	4.31	940	7.63
dnance	713	434	115	429	414	2	608.70	161.29	2.77	965	.66
gnal Corps	1,175	582	474	562	533	5	495.32	403.40	4.21	948	8.90
ospital Corps	3,355	1,794	1,565	1,756	1,665	20	534.72	466.47	5.89	948	11.39
thers	10,148	7,348	6,672	7,191	6,890	52	724.08	657.47	5.07	958	7.23
Total	80,766	54,257	45,249	53,035	50,818	397	671.78	560.25	4.86	958	7.49

Ratios for deaths based on mean strength present and absent, total, 81,697.

INTERNATIONAL TABLE IV.—*Movement of sick by months (enlisted men).*

AMERICAN TROOPS AT HOME.

Month.	Absolute numbers.						Proportionate numbers.				
	Mean strength.	Sick admissions.		Sick disposed of.			Per 1,000 of mean strength.			Per 1,000 sick disposed of.	
		Total.	To hospital.	Total.	Fit for duty (recovered).	Deaths.	Total sick admissions.	Admissions to hospital.	Deaths.	Fit for duty (recovered).	Deaths
January	59,198	3,760	3,233	3,541	3,386	28	63.52	54.61	0.47	956.23	7.9
February	59,771	3,221	2,819	3,351	3,194	32	53.99	47.16	.54	953.15	9.5
March	60,015	3,509	2,960	3,334	3,193	31	58.47	49.32	.52	957.71	9.3
April	60,040	2,985	2,464	2,984	2,846	18	49.72	41.04	.30	953.75	6.0
May	59,904	3,029	2,419	2,997	2,863	31	50.56	40.38	.52	955.29	10.3
June	58,476	2,949	2,356	2,845	2,701	20	50.43	40.29	.34	949.39	7.0
July	58,440	3,030	2,303	2,942	2,836	18	51.85	39.41	.31	963.97	6.1
August	60,435	2,879	2,163	2,866	2,742	24	47.64	35.79	.40	956.73	8.3
September	59,697	2,622	2,072	2,518	2,381	17	43.92	34.71	.28	945.59	6.7
October	59,244	3,094	2,438	2,909	2,784	38	52.22	41.15	.64	957.03	13.0
November	59,247	2,824	2,307	2,868	2,729	25	47.66	38.94	.42	951.53	8.7
December	60,832	3,049	2,525	2,883	2,758	16	50.12	41.51	.26	956.64	5.5
Total	59,608	36,951	30,059	36,038	34,413	298	619.90	504.28	5.00	954.91	8.2

AMERICAN TROOPS IN THE PHILIPPINE ISLANDS.

Month.	Absolute numbers.						Proportionate numbers.				
	Mean strength.	Sick admissions.		Sick disposed of.			Per 1,000 of mean strength.			Per 1,000 sick disposed of.	
		Total.	To hospital.	Total.	Fit for duty (recovered).	Deaths.	Total sick admissions.	Admissions to hospital.	Deaths.	Fit for duty (recovered).	Deaths
January	10,873	839	779	835	805	2	77.16	71.65	0.18	964.07	2.4
February	11,926	662	558	730	709	3	55.51	46.79	.25	971.23	4.1
March	11,459	948	891	939	916	2	82.73	77.76	.17	975.51	2.1
April	11,403	825	782	807	757	6	72.35	68.58	.53	938.04	7.4
May	11,775	890	811	876	851	2	75.58	68.87	.17	971.46	2.2
June	11,481	929	729	955	920	7	80.92	63.50	.61	963.35	7.3
July	10,884	923	839	906	870	13	84.80	77.09	1.19	960.26	14.3
August	11,070	999	925	969	937	5	90.24	83.56	.45	966.98	5.1
September	11,160	983	936	973	934	4	88.08	83.87	.36	959.92	4.1
October	11,027	803	757	849	820	2	72.82	68.65	.18	965.84	2.3
November	10,326	737	710	723	692	4	71.37	68.76	.39	957.12	5.5
December	10,872	778	749	752	720	3	71.56	68.89	.28	957.45	3.9
Total	11,188	10,316	9,466	10,314	9,931	53	922.06	846.09	4.74	962.87	5.1

INTERNATIONAL TABLE V.—*Movement of sick in the larger garrisons—Officers and enlisted men, year 1913.*

Garrisons.	Mean strength.	Total admissions.		Admissions to hospital.		Deaths.	
		Absolute numbers.	Per 1,000 of mean strength.	Absolute numbers.	Per 1,000 of mean strength.	Absolute numbers.	Per 1,000 of mean strength.
Presidio of San Francisco, Cal.	1,861	1,017	546.48	853	458.36	2	1.07
Fort Riley, Kans.	1,317	779	591.50	693	526.20	7	5.32
Vancouver Barracks, Wash.	1,294	541	418.08	444	343.12	4	3.09
Fort Sam Houston, Tex.	1,246	907	727.93	782	627.61	10	8.03
Columbus Barracks, Ohio.	1,186	1,527	1,287.52	1,458	1,229.34	14	11.80
Presidio of Montery, Cal.	1,130	440	389.38	372	329.20	4	3.54
Fort Monroe, Va.	1,111	424	381.64	325	292.53	1	.90
Jefferson Barracks, Mo.	1,110	986	888.29	963	867.57	8	7.21
Fort Slocum, N. Y.	1,088	1,749	1,607.54	1,675	1,539.52	3	2.76
Fort Leavenworth, Kans.	1,009	562	556.99	515	510.41	3	2.97
Fort Sill, Okla.	969	430	443.76	396	408.67	1	1.03
Fort Winfield Scott, Cal.	932	443	475.32	364	390.56	2	2.15
Camp E. S. Otis, Canal Zone, Panama.	841	711	845.42	385	457.79	7	8.32
West Point, N. Y.	818	393	480.44	298	364.30	4	4.89
Fort Douglas, Utah.	796	574	721.11	455	571.61	6	7.54
Plattsburg Barracks, N. Y.	782	510	652.17	420	537.08	1	1.28
Fort McDowell, Cal.	779	567	727.86	539	691.91	5	6.42
Fort Totten, N. Y.	769	445	578.67	380	494.15	2	2.60
Fort McPherson, Ga.	752	569	756.65	498	662.23	4	5.32
Fort Hancock, N. J.	724	365	504.14	330	455.80	3	4.14
Fort McKinley, Me.	717	355	495.12	279	389.12	4	5.58
Fort Bliss, Tex.	712	685	962.08	660	926.97	11	15.45
Fort Oglethorpe, Ga.	705	694	984.40	477	676.60	1	1.42
Fort H. G. Wright, N. Y.	677	335	494.84	305	450.52	2	2.95
Washington Barracks, D. C.	673	373	554.23	182	270.43	.....	.....
Madison Barracks, N. Y.	651	247	379.42	233	357.91	3	4.61
Fort Ethan Allen, Vt.	650	513	789.23	436	670.77	5	7.69
Fort Robinson, Nebr.	645	389	603.10	377	584.50	3	4.65
Fort Terry, N. Y.	611	309	505.73	274	448.45	1	1.64
Fort William H. Seward, Alaska.	360	192	533.33	159	441.67	4	11.11
Fort Gibbon, Alaska.	297	167	562.29	138	464.65	.....	.....
Fort Liscum, Alaska.	191	62	324.61	55	287.96	1	5.24
Fort St. Michael, Alaska.	148	49	331.08	47	317.57	.....	.....
Fort Davis, Alaska.	147	106	721.09	77	523.81	1	6.80
Schofield Barracks, Hawaii.	4,049	3,289	812.30	2,902	716.72	11	2.72
Fort Shafter, Hawaii.	1,167	597	511.57	519	444.73	.....	.....
Fort Ruger, Hawaii.	299	80	267.56	61	204.01	1	3.34
Fort Kamehameha, Hawaii.	281	140	498.22	55	195.73	1	3.56
Fort De Russy, Hawaii.	188	39	207.45	26	138.30	.....	.....
Fort Wm. McKinley, P. I.	2,726	2,553	936.54	2,432	892.15	10	3.67
Fort Mills, P. I.	2,241	1,147	511.83	1,067	476.13	13	5.80
Camp Stotsenburg, P. I.	1,372	1,344	979.59	1,283	935.13	5	3.64
Camp Keithley, P. I.	904	625	691.37	521	576.33	5	5.53
Augur Barracks, P. I.	839	1,380	1,644.82	1,323	1,576.88	37	44.10
Camp McGrath, P. I.	735	975	1,326.53	841	1,144.22	4	5.44
Cuartel de Espana, P. I.	578	366	633.22	332	574.39	1	1.73
Camp Eldridge, P. I.	496	443	893.15	407	820.56	1	2.02
Pettit Barracks, P. I.	465	321	690.32	319	686.02	3	6.45
Ludlow Barracks, P. I.	416	579	1,391.83	568	1,365.38	3	7.21
Fort Santiago and Headquarters, P. I.	374	222	593.58	170	454.55	.....	.....
Camp Connell, P. I.	367	254	692.10	233	634.88	3	8.17

INTERNATIONAL TABLE VI.—*Movement of sick according to most important diseases, Army (American troops), enlisted men, 1913.*

Diseases of the international nosological table.	Absolute numbers.									Proportionate numbers.					
	Remaining at close of 1912.	Admitted 1913.	Total remaining and admitted.	Disposed of 1913.				Remaining at close of 1913.	Total days sick in 1913.	Per 1,000 of mean strength.		Per 1,000 disposed of.			Average days of treatment.
				Fit for duty.	Died.	Otherwise.	Total.			Admissions.	Deaths.	Fit for duty.	Died.	Otherwise.	
1. Alkoholismus acutus, including delirum tremens	15	1,099	1,114	1,070	3	33	1,106	8	3,594	13.61	0.03	967.45	2.71	29.84	3.27
2. Appendicitis, typhlitis, and perityphlitis	49	580	629	553	9	25	58	42	15,352	7.18	.11	942.08	15.33	42.59	26.47
3. Bronchitis acuta	64	2,336	2,400	2,317	.....	27	2,344	56	13,787	28.92	.....	988.48	.....	11.52	5.90
4. Cholera Asiatica	.....	1	1	.....	1	.....	1	.....	4	.01	.01	.....	1,000.00	.....	4.00
5. Cholera nostras	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. Diphtheria et croup	3	23	26	20	.....	1	21	5	443	.28	.....	952.38	.....	47.62	19.26
7. Dysenteria	20	309	329	295	7	13	315	14	7,534	3.83	.09	936.51	22.22	41.27	24.38
8. Erysipelas	1	41	42	39	.....	3	42	.....	881	.51	.....	928.57	.....	71.43	21.49
9. Febris intermittens (malaria)[1]	11	1,435	1,446	1,405	.....	28	1,433	13	9,352	17.77	.....	980.46	.....	19.54	6.52
10. Febris recurrens	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. Fractura ossium	110	989	1,099	924	30	70	1,024	115	41,635	12.24	.37	902.34	29.30	68.36	42.10
12. Gonorrhea	236	4,467	4,703	3,357	.....	113	3,470	1,056	71,717	55.31	.....	967.44	.....	32.56	11.58
13. Hernia	27	291	318	267	5	22	294	25	11,937	3.60	.06	908.16	17.01	74.83	41.02
14. Influenza	55	1,221	1,276	1,241	.....	9	1,250	25	6,508	15.12	.....	992.80	.....	7.20	5.33
15. Insolatio (Hitzschlag coup de chaleur)	.....	3	3	2	1	.....	3	.....	45	.04	.01	666.67	333.33	.....	15.00
16. Luxationes articulorum	10	218	228	208	2	9	219	10	3,867	2.70	.02	949.77	9.13	41.10	17.74
17. Meningitis cerebrospinalis epidemica	3	35	38	24	11	3	38	.....	2,278	.43	.13	631.58	289.47	78.95	65.09
18. Morbilli	13	520	533	501	11	16	528	6	10,498	6.44	.13	948.86	20.83	30.30	20.19
19. Parotitis epidemica	43	634	677	654	.....	14	668	10	10,926	7.85	.....	979.04	.....	20.96	17.23
20. Pleuritis	14	212	226	200	4	12	216	10	4,627	2.62	.05	925.93	18.52	55.56	21.83
21. Pneumonia crouposa sive lobaris	21	179	200	153	23	8	184	16	5,483	2.22	.28	831.52	125.00	43.48	30.63
22. Rheumatismus articulorum	44	547	591	528	.....	36	564	28	16,585	6.77	.....	936.17	.....	63.83	30.32
23. Scarlatina	1	4	5	5	.....	.....	5	.....	204	.05	.....	1,000.00	.....	.....	51.00
24. Scorbutus	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
25. Syphilis	92	1,875	1,967	1,645	5	55	1,705	143	39,597	23.22	.06	964.81	2.93	32.26	21.12
26. Trachoma	3	17	20	13	.....	8	21	.....	799	.21	.....	619.05	.....	380.95	47.00
27. Tuberculosis pulmonum[2]	139	260	399	53	28	183	264	138	53,236	3.22	.34	200.76	106.06	693.18	204.75
28. Tuberculosis ceterorum organorum	10	36	46	10	12	20	42	7	3,943	.45	.15	238.10	285.71	476.19	109.53
29. Typhus abdominalis	2	4	6	3	.....	.....	3	3	239	.05	.....	1,000.00	.....	.....	59.75
30. Typhus exanthematicus	.....	3	3	2	.....	1	3	.....	190	.04	.....	666.67	.....	333.33	53.38
31. Ulcus molle	53	1,510	1,563	1,068	.....	21	1,089	388	21,670	18.70	.....	980.72	.....	19.28	14.35

33. Morbi auris	11	447	458	430	2	18	450	9	6,055	5.53	.02	955.56	4.44	40.00	12.90
34. Morbi cordis [3]	16	116	132	72	17	38	127	10	5,493	1.44	.21	566.93	133.86	299.21	47.35
35. Morbi cutis [4]	38	1,672	1,710	1,655	.....	20	1,675	35	15,831	20.70	.....	988.06	.....	11.94	2.47
36. Morbi mentis	48	278	326	43	.....	212	255	67	23,500	3.44	.....	168.63	.....	831.37	84.53
37. Morbi oculi	25	655	680	631	.....	32	663	18	8,996	8.11	.....	951.73	.....	48.27	13.73
38. Morbi systemat. urin. et sexual (excluding venerie et syphilis)	32	742	774	670	17	56	743	30	13,646	9.19	.21	901.75	22.88	75.37	18.39

[1] Malarial fever, intermittent only.
[2] Includes tuberculosis of the larynx.
[3] Includes pericarditis and endocarditis.
[4] Diseases of the skin proper only.

INTERNATIONAL TABLE VII.—*Most important diseases, by arms of service (enlisted men), 1918.*

Diseases of the international nosological table.	Absolute numbers—Admissions by arms of service.									Proportionate numbers—Admissions per 1,000 of mean strength.								
	Infantry.	Cavalry.	Coast Artillery.	Field Artillery.	Engineers.	Ordnance.	Signal Corps.	Hospital Corps.	Others.	Infantry.	Cavalry.	Coast Artillery.	Field Artillery.	Engineers.	Ordnance.	Signal Corps.	Hospital Corps.	Others.
1. Alkoholismus acutus, including delirium tremens	377	106	311	52	19	13	17	86	118	13.00	7.90	18.87	10.68	11.84	18.23	14.47	25.63	11.63
2. Appendicitis typhlitis and perityphlitis	209	88	104	38	17	1	6	46	71	7.21	6.56	6.31	7.80	10.59	1.40	5.11	13.71	7.00
3. Bronchitis acuta	813	416	320	173	42	32	33	90	417	28.03	30.99	19.42	35.53	26.17	44.88	28.09	26.83	41.09
4. Cholera Asiatica		1									.07							
5. Cholera nostras																		
6. Diphtheria et croup	10	2	2		3		2	2	2	.34	.15	.12		1.87		1.70	.60	.20
7. Dysenteria	160	68	23	22	6		4	13	13	5.52	5.07	1.40	4.52	3.74		3.40	3.87	1.28
8. Erysipelas	4	8	9	3			1	3	13	.14	.60	.55	.62			.85	.89	1.28
9. Febris intermittens (malaria) [1]	713	194	149	141	65		14	56	103	24.59	14.45	9.04	28.96	40.50		11.92	16.69	10.15
10. Febris recurrens																		
11. Fractura ossium	288	231	199	68	28	7	11	28	129	9.93	17.21	12.08	13.97	17.45	9.82	9.36	8.35	12.71
12. Gonorrhea	1,834	777	813	289	82	13	45	127	487	63.24	57.89	49.34	59.36	51.09	18.23	38.30	37.85	47.99
13. Hernia	98	45	54	16	3	2	4	13	56	3.38	3.35	3.28	3.29	1.87	2.81	3.40	3.87	5.52
14. Influenza	433	193	271	80	16	25	19	73	111	14.93	14.38	16.45	16.43	9.97	35.06	16.17	21.76	10.94
15. Insolatio (Hitzschlag, coup de chaleur)		1			2						.07			1.25				
16. Luxationes articulorum	76	52	38	22	8		1	3	18	2.62	3.87	2.31	4.52	4.98		.85	.89	1.77
17. Meningitis cerebro-spinalis epidemica	6	7	3		1				18	.21	.52	.18		.62				1.77
18. Morbilli	148	37	138	25	4		1	16	151	5.10	2.76	8.37	5.13	2.49		.85	4.77	14.88
19. Parotitis epidemica	186	93	106	37	2		9	12	189	6.41	6.93	6.43	7.60	1.25		7.66	3.58	18.62
20. Pleuritis	91	32	19	18	9	2	1	9	31	3.14	2.38	1.15	3.70	5.61	2.81	.85	2.68	3.05
21. Pneumonia crouposa sive lobaris	59	30	32	8	3		2	6	39	2.03	2.24	1.94	1.64	1.87		1.70	1.79	3.84
22. Rheumatismus articulorum	210	74	119	22	9	6	5	21	81	7.24	5.51	7.22	4.52	5.61	8.42	4.26	6.26	7.98
23. Scarlatina	2		2							.07		.12						
24. Scorbutus																		
25. Syphilis	858	329	274	121	29	3	25	59	177	29.59	24.51	16.63	24.85	18.07	4.21	21.28	17.59	17.44
26. Trachoma	4	1	2	1					9	.14	.07	.12	.21					.89
27. Tuberculosis pulmonum [2]	109	29	52	17	4	1	3	17	28	3.76	2.16	3.16	3.49	2.49	1.40	2.55	5.07	2.76
28. Tuberculosis ceterorum organorum	10	6	8		1	1		2	8	.34	.45	.49		.62	1.40		.60	.79
29. Typhus abdominalis	1		1						2	.03		.06						.20
30. Typhus exanthematicus	3									.10								
31. Ulcus molle	751	238	255	83	16	2	17	25	123	25.90	17.73	15.48	17.05	9.97	2.81	14.47	7.45	12.12

32. Variola	6	.....	1	.....	.....	.....	.....	1	.....	.21	.....	.06	.....	.....	.....	.30	.....
33. Morbi auris	201	86	49	38	8	1	8	17	39	6.93	6.41	2.97	7.80	4.98	1.40	6.81	5.07	3.84
34. Morbi cordis	40	25	19	4	1	3	.....	4	20	1.38	1.86	1.15	.82	.62	4.21	.....	1.19	1.97
35. Morbi cutis	584	280	364	122	33	9	25	28	227	20.14	20.86	22.09	25.05	20.56	12.62	21.28	8.35	22.37
36. Morbi mentis	112	35	53	10	4	3	3	18	40	3.86	2.61	3.22	2.05	2.49	4.21	2.55	5.37	3.94
37. Morbi oculi	220	106	135	35	10	5	12	22	110	7.59	7.90	8.19	7.19	6.23	7.01	10.21	6.56	10.84
38. Morbi systemat. urin. et sexual (excluding venerie et syphilis)	230	133	142	45	12	6	11	26	137	7.93	9.91	8.62	9.24	7.48	8.42	9.36	7.75	13.50

[1] Malarial fever, intermittent only.

[2] Includes tuberculosis of the larynx.

INTERNATIONAL TABLE VIII.—*Most important diseases, by months (enlisted men), 1913.*

Diseases of the international nosological table.	Admissions by months.											
	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.
1. Alkoholismus acutus, including delirium tremens	103	90	89	75	86	104	81	94	88	90	97	102
2. Appendicitis, typhlitis, and perityphlitis	46	34	40	42	49	59	63	50	41	58	49	49
3. Bronchitis acuta	292	265	266	153	127	173	169	147	148	181	187	228
4. Cholera Asiatica											1	
5. Cholera nostras												
6. Diphtheria et croup		2	5	2	1	1	1			2	2	7
7. Dysenteria	21	19	35	36	22	30	40	21	23	20	23	19
8. Erysipelas	8	4	10	5	2	4	4	1		1	1	1
9. Febris intermittens (malaria)	51	106	290	101	124	151	132	128	107	77	97	71
10. Febris recurrens												
11. Fractura ossium	84	58	74	71	76	90	93	66	87	99	102	89
12. Gonorrhea	382	354	365	321	331	369	378	422	376	400	392	377
13. Hernia	26	29	20	15	35	27	27	20	19	24	27	22
14. Influenza	356	205	152	103	77	23	41	35	28	50	61	90
15. Insolatio (Hitzschlag coup de chaleur)							3					
16. Luxationes articulorum	18	21	13	12	20	17	23	24	17	16	13	24
17. Meningitis cerebro-spinalis epidemica	13	2	8	2	2	4	1	1	1		1	
18. Morbilli	79	71	137	70	68	73	9	1		2	2	8
19. Parotitis epidemica	97	50	110	122	93	46	23	23	33	8	13	16
20. Pleuritis	12	13	27	19	18	15	13	23	14	22	18	18
21. Pneumonia crouposa sive lobaris	37	26	26	13	15	3	5	5	6	15	8	20
22. Rheumatismus, articulorum	68	49	98	59	52	58	22	34	23	23	23	38
23. Scarlatina		1	1	1			1					
24. Scorbutus												
25. Syphilis	200	142	144	136	150	152	153	163	154	162	156	163
26. Trachoma	1	2	2	4	1	1		4			1	1
27. Tuberculosis pulmonum	28	25	21	19	20	19	30	17	26	19	16	20
28. Tuberculosis ceterorum organorum	4	3	5	4	3		3	4	2		6	2
29. Typhus abdominalis		1			1	1					2	
30. Typhus exanthematicus			1		1				1			
31. Ulcus molle	102	97	113	120	88	112	112	142	157	177	136	154
32. Variola	3	1	3		1							
33. Morbi auris	48	38	35	31	27	40	47	47	46	29	33	26
34. Morbi cordis	9	10	8	13	8	7	11	14	9	13	7	7
35. Morbi cutis	129	126	120	126	132	147	198	154	149	149	127	115
36. Morbi mentis	23	12	26	27	30	17	30	23	29	25	12	24
37. Morbi oculi	55	47	62	56	50	57	60	71	42	57	55	43
38. Morbi systemat. urin. et sexual (excluding venerie et syphilis)	56	54	62	70	74	77	63	59	63	57	49	58

INTERNATIONAL TABLE IX.—*Deaths by rank, by length of service, and by age.*

Causes of death.	Total number of deaths (enlisted men).		Deaths by rank and length of service.				Deaths by age.					
	Absolute numbers.	Per 1,000 of mean strength.	Noncommissioned officers.	Soldiers in first year of service.	Soldiers in second year of service.	Soldiers in third year of service and beyond.	20 and under.	21 to 25.	26 to 30.	31 to 35.	36 to 40.	41 and over.
Deaths from sickness	210	2.57	49	44	32	85	18	61	38	42	19	32
Soldiers present with troops	138	1.69	32	38	18	50	13	45	24	20	14	22
Soldiers absent from troops	72	.88	17	6	14	35	5	16	14	22	5	10
Accidental deaths[1]	145	1.77	20	33	27	65	8	65	37	21	3	11
Soldiers present with troops	135	1.65	19	32	25	59	8	59	35	21	3	9
Soldiers absent from troops	10	.12	1	1	2	6	....	6	2	....	....	2
Suicides	42	.51	7	4	10	21	2	14	12	8	5	1
Soldiers present with troops	31	.38	7	3	6	15	2	8	9	7	4	1
Soldiers absent from troops	11	.13	.....	1	4	6	....	6	3	1	1	....
Total	397	4.86	76	81	69	171	28	140	87	71	27	44

[1] Includes 17 homicides.

INTERNATIONAL TABLE X.—*Discharges from the Army for physical disability, temporary or permanent, by rank, length of service, and by age, 1913.*

Causes of discharge.	Total discharges (enlisted men).		Rank and length of service.				Age.					
	Absolute numbers.	Per 1,000 of mean strength.	Noncommissioned officers.	Soldiers in first year of service.	Soldiers in second year of service.	Soldiers in third year of service and beyond.	20 and under.	21 to 25.	26 to 30.	31 to 35.	36 to 40.	41 and over.
Physical disability existent prior to enlistment	480	5.88	8	279	119	74	56	293	87	31	8	5
Physical disability incident to service	467	5.72	77	67	76	247	19	169	129	70	50	30
Physical disability not incident to service	135	1.65	3	29	28	75	5	56	40	19	11	4
Total	1,082	13.24	88	375	223	396	80	518	256	120	69	39

Very respectfully,

W. C. GORGAS,
Surgeon General, U. S. Army.

Approved:
W. W. WOTHERSPOON,
Acting Secretary of War.

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ANNUAL REPORTS, WAR DEPARTMENT

FISCAL YEAR ENDED JUNE 30, 1915

REPORT OF THE

SURGEON GENERAL

U. S. ARMY

TO THE SECRETARY OF WAR

1915

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REPORT OF THE SURGEON GENERAL OF THE ARMY.

War Department,
Office of the Surgeon General,
Washington, October 5, 1915.

The Secretary of War.

Sir: I have the honor to submit herewith the annual report upon the work of the Medical Department; this covers a study of the health and sanitary conditions of the Army for the calendar year 1914, and a financial statement for the fiscal year ending June 30, 1915. I desire here to invite attention to certain matters of interest in this report.

Admission rate.

The admission rate for the entire Army in 1914 is 660 per 1,000, the lowest on record in this office. The rate for American troops is 665.83 for 1914, as compared with 671.78 in 1913. This rate was highest in China and Panama (1,080.23 and 955.22, respectively), and lowest in Alaska, 422.95.

Noneffective rate.

The constantly noneffective rate is the true index of the loss of efficiency of the Army from disease and injury. For the entire Army in 1914 the rate was 23.78, the lowest rate recorded for our Army. The rate for American troops is 24.02 for 1914, as compared with 24.33 for 1913. This rate was highest in Panama, 37.30, and lowest in Alaska, 10.52.

The rate for discharge for disability for the entire Army is 12.99; this rate was 12.97 for 1913.

The death rate for the entire Army is 4.40. In 1913 it was 5.15.

Typhoid fever.

With the satisfactory general rates mentioned, the lower rates for certain diseases are noteworthy. Chart P shows graphically the continued progress in stamping out typhoid fever in the Army. Among our troops stationed in the United States, Alaska, the Philippines, Hawaii, Panama, Porto Rico, and China, including the Philippine Scouts and Porto Rican troops, the total mean strength of which was 98,649, only 7 cases of typhoid fever occurred. Only 2 of these cases had received the complete course of vaccine.

The admission rate for tuberculosis in the entire Army is the lowest on record, being 3.50. The admission rate for this disease in the United States is also the lowest recorded for troops serving in the United States, being 2.69.

Venereal diseases.

The reduction in the amount of venereal disease since the passage of the act of Congress stopping the pay of those incapacitated has been maintained with but a slightly higher rate than for 1913; the rate for 1914 is 89.84 for the United States.

The rate which indicates the prevalence of alcoholism in the Army is lower for 1914 than for any ever recorded, being 13.64 per 1,000.

Malarial fevers.

The rates for malarial fevers continue low, that for the entire Army being 29.48. For the United States the rate—10.79—while slightly higher than for 1913, is lower than for any year previous to 1913.

I desire again to urge the necessity of rendering, by reorganization, the Hospital Corps more attractive. Men of intelligence are needed if this body is to remain efficient; to get them, inducements must be made by offering better pay. The character of the work performed at the present day demands more than formerly. Certainly the lessons of the present war demonstrate the need of a sufficient and trained Hospital Corps.

The new sanitary units organized in 1914 have justified their existence during the year on the Mexican border. There still remains a marked shortage of mobile sanitary units, and a need for suitable barracks and stables for them also exists.

Measures have been effected this year to continue the instruction of officers of the Medical Corps to keep them up to date in their professional attainments, as is done with other officers of the Army.

HEALTH OF THE ARMY.

International Nomenclature.

The diagnostic terms for diseases and injuries, adopted by the Medical Department in accordance with the International Nomenclature, are used with the international numbers for the third year in this report.

The International Nomenclature is used by most of the important foreign countries. It is also used by the Census Bureau in this country and by an increasing number of boards of health and large hospitals.

In studying statistics for other countries where the terms used are expressed in a foreign language, the international number furnishes a ready key for their interpretation.

Following Table No. 81 will be found the 10 tables giving the military statistics for the year 1914, as agreed upon at the International Commission for the Unification of the Medical Statistics of Armies, held at Budapest in 1894, at Madrid in 1903, and modified by the last meeting held at Berlin in 1907. The diagnostic terms and numbers used in these tables are those agreed upon by the commission, and are not to be confused with the terms and numbers of the international nomenclature used in the remainder of this report and based upon the second decennial revision by the International Commission held in Paris July 1 to 3, 1909.

As in 1912 and 1913, only original admissions are used in compiling the statistics in this report. In the years 1904 to 1911, inclusive (reports 1905–1912), the readmissions were counted as admissions. In this report, in making comparisons between cases and admissions, the terms case admission (reports 1913–15, inclusive, and prior to the one for 1905) and total admission (reports 1905 to 1912, inclusive), will be used.

Admission Rates.

Table No. 81 shows the total admission and case admission rates for American troops of the Army, for the United States, continental (exclusive of Alaska), and for American troops in the Philippine Islands, for diseases, external causes, and all causes separately for each year, 1904 to 1911, inclusive.

Table No. 68½ gives the rates per 1,000 for the entire Army. So much interest has been shown concerning the incidence of certain diseases, especially tuberculosis, typhoid fever, and venereal diseases, for the entire Army—that is, for all officers and enlisted men, both American and native troops—that it was deemed advisable to publish this data to include all troops together. The rates for American troops, enlisted men, placed in comparison for ready reference, may be found in Tables Nos. 69 and 76.

OFFICERS.

The mean strength of officers was 4,361, as obtained from the reports of sick and wounded of the Medical Department, and 4,827 from the Office of The Adjutant General. There were 2,162 admissions, 23 deaths, and 100.81 constantly noneffective from all causes, equal to ratios of 495.76, 4.76, and 23.12 as compared with ratios of 517.23, 5.85, and 23.83 per 1,000 for the year 1913. The constantly noneffective rate was lower than for 1913; the admission and death rates were much lower.

The chief causes of admission and their rates were diarrhea and enteritis, 37.61; bronchitis, 35.08; diseases of the pharynx, 35.08; influenza, 29.81; diseases of the nasal fossæ, 23.85; malaria, 21.78; diseases of the stomach (ulcer and cancer excepted), 19.27; and appendicitis, 7.57.

OFFICERS RETIRED.

Thirty officers were retired on account of disability during the year, making a rate for retirement for disability of 6.22 per 1,000 as compared with 7.52 for 1913. The discharge rate for disability in enlisted men (all) was 12.78.

The following table shows the principal causes for which retirements were made and the rank and age of the officers retired; 56.66 per cent were officers of the field grade:

TABLE NO. 1.—*Retirement of officers, United States Army, year 1914, for disability, by causes and rank, grouped by ages.*

	Total.		Ages of officers, quinquennial groups.								
	Number.	Ratio per 1,000 of all officers.	24 years and under.	25 to 29 years.	30 to 34 years.	35 to 39 years.	40 to 44 years.	45 to 49 years.	50 to 54 years.	55 to 59 years.	60 years and over.
CAUSES OF RETIREMENT.											
Organic heart disease	6	1.24					1	1		3	1
Pulmonary tuberculosis	3	.62			1			1	1		
Psychasthenia	3	.62			1		1			1	
Neurasthenia	3	.62			1		1	1			
Arteriosclerosis	3	.62							1	1	1
Epilepsy	2	.41		1			1				
Chronic interstitial nephritis	2	.41								2	
Obesity	1	.21						1			
Locomotor ataxia	1	.21				1					
General paresis	1	.21				1					
Hysteria, chronic	1	.21				1					
Aneurism	1	.21							1		
Gastroenteritis and anemia	1	.21									1
Ankylosis	1	.21						1			
Loss of eye	1	.21				1					
RANK IN SERVICE.											
Colonel	9	1.86								6	3
Lieutenant colonel	5	1.04						3	1	1	
Major	3	.62						2	1		
Captain	4	.83			1		3				
First lieutenant	6	1.24			1	4	1				
Second lieutenant	2	.41		1	1						
Chaplain	1	.21							1		
Number of retirements	30	6.22		1	3	4	4	5	3	7	3
Number of officers in service	4,827		231	980	910	1,030	788	453	227	146	62
Ratio per 1,000 of each group				1.02	3.30	3.88	5.08	11.04	13.22	47.95	48.39

There were 23 deaths, with a rate of 4.76 per 1,000, as compared with 28 deaths, with a rate of 5.85, in 1913.

The following table shows the causes of deaths of officers:

TABLE NO. 2.—*Deaths of officers, United States Army, year 1914, by causes and rank, grouped by ages.*

	Total.		Ages of officers, quinquennial groups.								
	Number.	Ratio per 1,000 of all officers.	24 years and under.	25 to 29 years.	30 to 34 years.	35 to 39 years.	40 to 44 years.	45 to 49 years.	50 to 54 years.	55 to 59 years.	60 years and over.
CAUSES OF DEATH.											
Pulmonary tuberculosis	4	0.83	.....	.....	.....	2	2	.....	.....	.....	.....
Cancer	4	.83	.....	.....	.....	1	.....	.....	.....	1	2
Fracture of skull (struck by automobile, 1; thrown from horse, 2).	3	.62	.....	1	1	1	.....	.....	.....	.....	.....
Drowning, accidental	2	.41	1	1	.....	.....	.....	.....	.....	.....	.....
Gunshot wounds, suicidal	2	.41	.....	.....	.....	2	.....	.....	.....	.....	.....
Cerebral hemorrhage	1	.21	.....	.....	.....	.....	.....	.....	.....	1	.....
Septic endocarditis	1	.21	.....	.....	.....	1	.....	.....	.....	.....	.....
Arterial sclerosis	1	.21	.....	.....	.....	.....	.....	.....	.....	1	.....
Gastric hemorrhage	1	.21	.....	.....	.....	1	.....	.....	.....	.....	.....
Abscess of pancreas	1	.21	.....	1	.....	.....	.....	.....	.....	.....	.....
Crushing, by fall with aeroplane	1	.21	.....	1	.....	.....	.....	.....	.....	.....	.....
Exhaustion and exposure, after rescue from sunken steamer	1	.21	.....	1	.....	.....	.....	.....	.....	.....	.....
Lightning stroke	1	.21	.....	1	.....	.....	.....	.....	.....	.....	.....
RANK IN SERVICE.											
Colonel	4	.83	.....	.....	.....	.....	.....	.....	.....	3	1
Lieutenant colonel	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Major	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Captain	6	1.24	.....	1	.....	4	1	.....	.....	.....	.....
First lieutenant	8	1.66	.....	2	1	4	1	.....	.....	.....	.....
Second lieutenant	4	.83	1	3	.....	.....	.....	.....	.....	.....	.....
Chaplain	1	.21	.....	.....	.....	.....	.....	.....	.....	.....	1
Number of deaths	23	4.76	1	6	1	8	2	.....	.....	3	2
Number of officers in service	4,827	.....	231	980	910	1,030	788	453	227	146	62
Death rate per 1,000 of each group	.....	.....	4.33	6.12	1.10	7.77	2.54	.....	.....	20.55	32.26

ENLISTED MEN.

The mean enlisted strength of the Army, American troops, white and colored, for the year 1914, as reported on the monthly sick reports of the Medical Department, was 87,228, and on the returns of The Adjutant General's Office 88,133. The former represents the strength of the commands from which the sick returns were made and was used in calculating all ratios except those for deaths and discharges. As all deaths and discharges were reported, even of those absent from a command, the total strength as obtained from The Adjutant General was used in calculating ratios pertaining to those headings. There was an increase in strength over the year 1913, for which the medical returns showed 80,766 and The Adjutant General's Office 81,697.

During the year 1914 American troops were stationed in the United States proper, the Philippine Islands, China, Alaska, Hawaii, and the Canal Zone. Native troops served in Porto Rico and the Philippines. Statistics for the native troops, Porto Rico and Philippine, have been separately compiled, and when reference is made to the "Army" in this report the entire Army—officers, white, colored, and native enlisted men—is meant.

The size of garrisons in the Tropics, which constituted such a large percentage of our military forces, renders of more importance than formerly the general rates for the entire Army.

Charts A, B, C, D, E, F, and G are for the entire Army for the decade 1905–1914. For years prior to 1905 the same data as shown in these charts will be found published in the report for 1912, pages 14, 15, and 16.

Table No. 76 gives American troops, enlisted men by countries, placed in comparison for 1914.

The admission and noneffective rates for the entire Army and for the troops in geographical divisions are readily comparable in the following tabulation:

	Army (entire).	American troops of the Army (enlisted).	Enlisted men serving in geographical divisions.							
			Alaska.	American troops in Philippine Islands.	Philippine Scouts.	Hawaii.	Panama.	Porto Rico.	United States.	China.
Admission rates:										
1914	660.45	665.83	422.95	877.69	714.14	523.27	955.22	629.30	629.84	1,080.23
1913	665.95	671.78	495.18	922.06	681.12	701.63	853.20	818.18	619.90	911.18
Noneffective rates:										
1914	23.78	24.02	10.52	30.58	20.30	18.75	37.30	22.52	23.37	29.68
1913	23.97	24.33	13.62	30.91	18.31	24.18	30.23	24.58	22.94	26.91

The rates are slightly higher in the United States this year and very much higher for the troops in Panama and China. They are lower in all other geographical divisions. The most satisfactory re-

duction in admission and noneffective rates is among the troops stationed in Hawaii. There a reduction of 22 per cent in the noneffective rate is observed for 1914 over the preceding year.

ADMISSIONS TO SICK REPORT (AMERICAN TROOPS, ENLISTED MEN).

[See Tables Nos. 69 and 76.]

The admissions to sick report during 1914 show a satisfactory decrease. The rate is 665.83. The admission rate for disease only is 539.46. This rate for 1914 is the lowest ever attained in the history of the Army. Table No. 81 shows the case admission and total admission rates for all American troops, those in the United States and those in the Philippine Islands, 1904 to 1911, inclusive. The highest admission rates were caused by the diseases named, as follows: Venereal, 110.69; diseases of the pharynx, 56.96; bronchitis, 33.83; diarrhea and enteritis, 31.39; malarial, 20.07. The rates just given are for the American Army enlisted men serving within the United States and abroad and are given first for convenience of comparison. For the entire Army (all officers and enlisted men, including native troops born in the Tropics) the rate is 660.45. For disease only the rate is 538.09. The rate for disease this year is slightly higher both among the American troops and for the entire Army. This is probably accounted for by increased rates for venereal diseases.

For venereal diseases the rate for white troops was 109.48; for colored, 128.70. The rates in the Philippines, for these troops, were 174.79 and 233.76, respectively, which are slightly higher for both races over the rates of 1913 in the Philippines—140.77 and 194.37, respectively. These high rates are due to local social conditions and indicate that radical changes in conditions must appear before rates comparable to those in the United States may obtain. As the rate for 1912 for colored troops in the Philippines was 524.06, the highest recorded in the Army, the present rate is an indication of the effectiveness of the measures instituted for improvement in this condition.

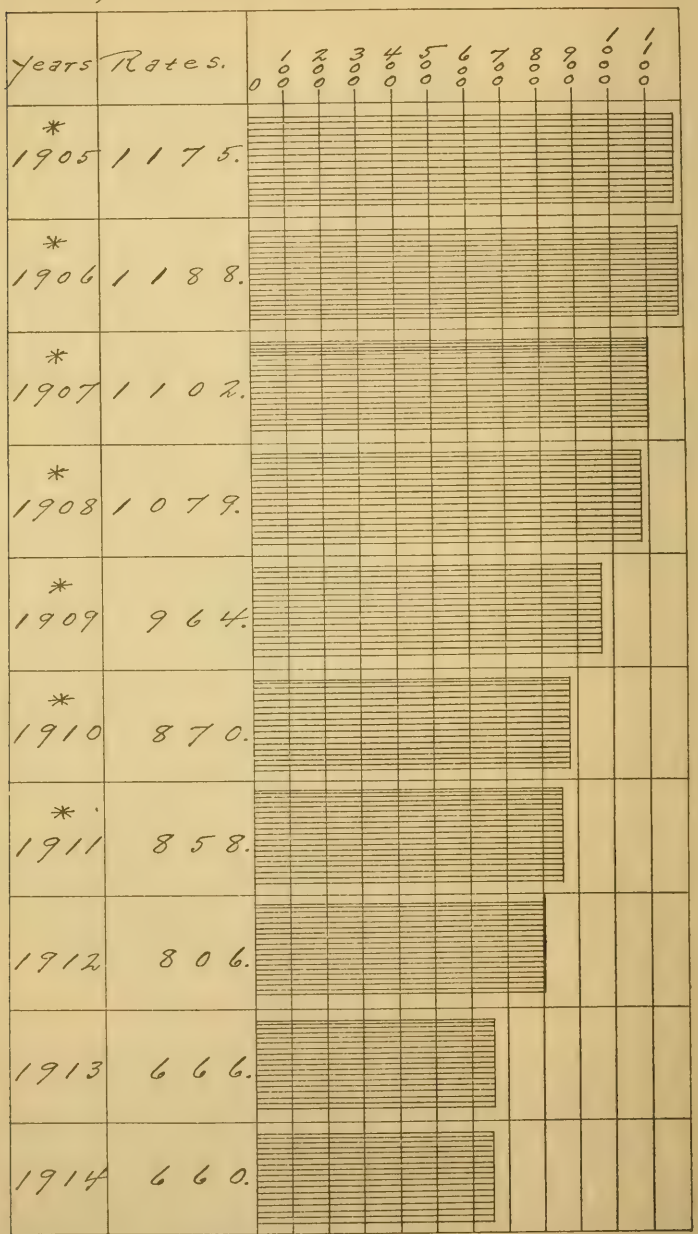
The case admission rate for external causes was 126.37. In 1913 this rate was 136.52, and in 1912 was 149.64. The principal causes for this rate were: Traumatism by fall, 36.58; injuries by animals, 12.21; traumatism by cutting or piercing instruments, 9.86; burns, 3.75; traumatism by firearms, 2.58. Four men were shot by sentry, with no deaths. None were wounded in action.

NONEFFECTIVE RATE.

Chart B shows for the entire Army the constantly noneffective rate for all causes from the year 1905 to 1914, inclusive. This rate is the true measure of nonefficiency of the Army from sickness and injury. The rate for disease and injury obtained for the total American troops, enlisted men, for the year 1914 was 24.02, as compared with 24.33 per 1,000 in 1913. The rate for 1914 is the lowest recorded noneffective rate in the history of the Army. The highest noneffective rate on record was for the year 1898, when the total rate was 82.83 per 1,000 and the rate for diseases alone was 69.09. The non-

Chart A.

Admission rates, All Causes, for The Army {Officers, and American and Native enlisted men} Years, 1905–1914.



*Excess of cases deducted to correspond with years preceding 1904, and 1912 to 1914.

Chart B.

Noneffective rates, All Causes, for The Army {Officers, and American and Native enlisted men} years, 1905-1914.

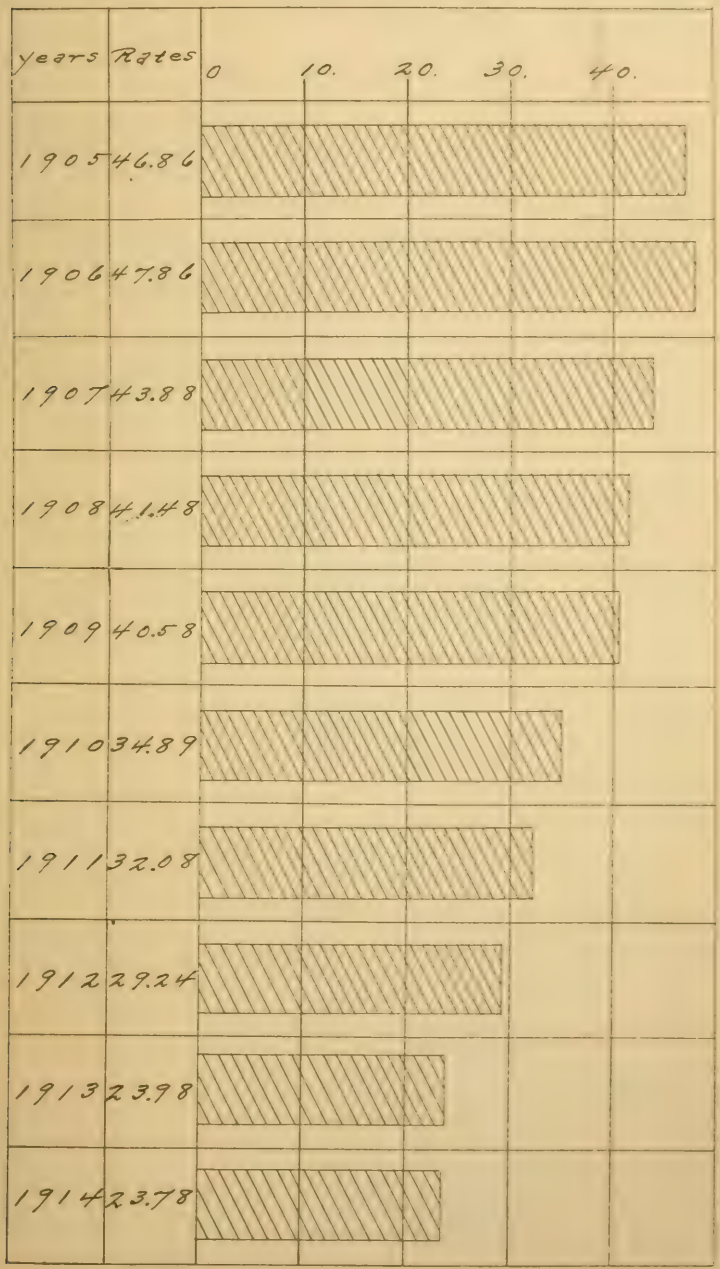
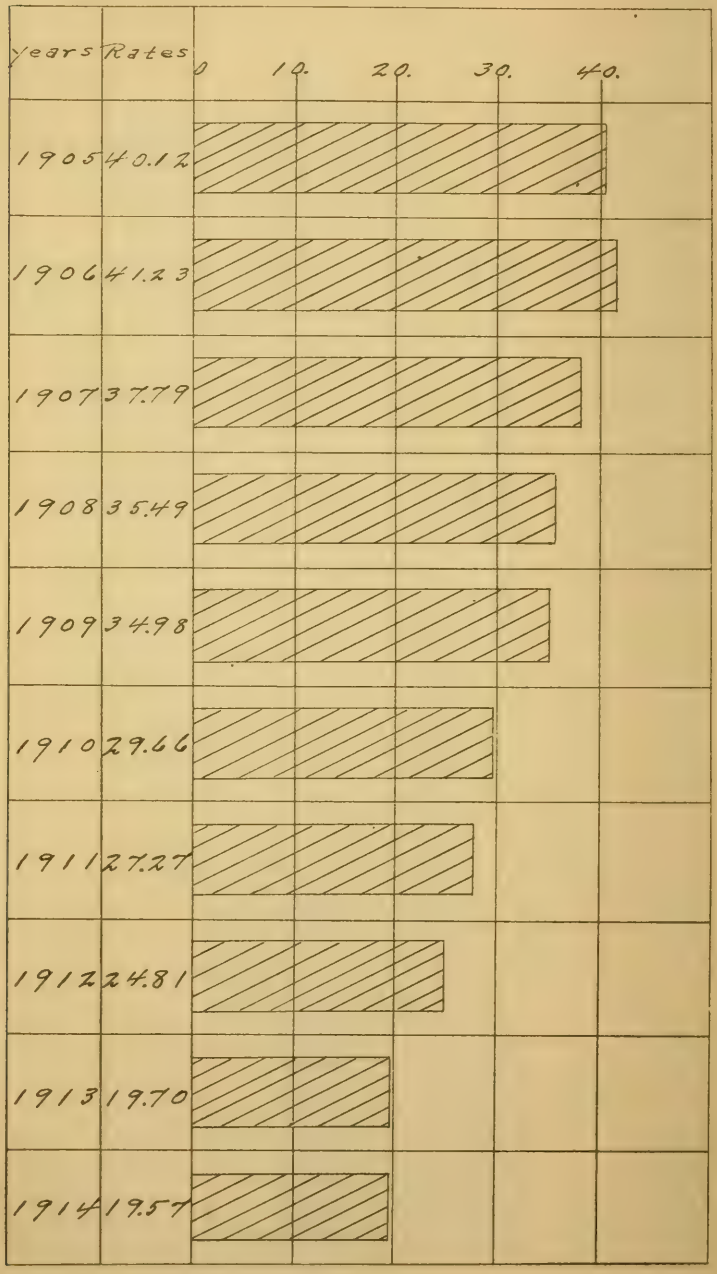


Chart C.

Noneffective rates for Disease for The Army { Officers, and American and Native enlisted men } years, 1905–1914.



ffective rate for all troops in the military service or the entire Army s of even more interest as a measure of the effectiveness of sanitary neasures applied to a wider range of conditions. Even under the nore diverse and less promising conditions surrounding native troops n the Tropics this rate is 23.78 per 1,000 for 1914, for disease alone t is 19.57, a slightly lower rate than the 19.72 for American troops.

DISCHARGES FOR DISABILITY.

Chart D gives the rates for discharges for disability for the Army rom the year 1905 to 1914, inclusive.

Soldiers stationed outside of the territorial limits of the United tates are brought to the United States for discharge, except those elonging to the Porto Rican regiment and the Philippine Scouts. They are, however, credited in the tabulated reports to the country n which the soldiers were serving when they became disabled if their ommands were there at date of discharge.

The present system requires that all soldiers certified by medical fficers to be permanently incapacitated for the military service hall be critically examined by a board of two medical officers before eing discharged. The reports of these boards go to the department eadquarters from where discharges are ordered, except in the cases f soldiers at a recruit depot or general hospital and the reports of oards on insane patients. In the latter circumstances the reports re sent to the Adjutant General of the Army, who directs the dis- harge or issues the order when insane are recommended to be trans- erred to the Government Hospital for the Insane, Washington, D. C.

The disability rate for 1914 was lower than for any year since the panish-American War, the lowest rates being for the years 1894–1898, nclusive, and for the year 1867. In 1914 there were in the Army ,145 men, American troops, discharged for disability, the rate being 2.99 per 1,000. The corresponding rate for the preceding year was 3.24. The rate for 1867 was 13 per 1,000, and the lowest rate from 894–1898, inclusive, was that for 1895, the lowest on record in the rmy, 9.15 per 1,000. The highest rate in any year for discharge for isability was in 1849, when the total rate for discharge was 76.7 per ,000. The rate for the entire Army was 12.78.

The discharge rate for disease in 1914 was 11.39 per 1,000, as com- ared with 11.93 in 1913, and that for external causes was 1.60 in 914, as compared with 1.31 in 1913. The diseases causing the ighest discharge rate in 1914 were as follows, absolute numbers and ates per 1,000 being given:

Discharges, enlisted men (American troops).

Disease.	Number.	Rate.
ental alienation	259	2.94
uberculosis	182	2.07
lat foot	78	.89
enereal diseases	67	.76
pilepsy	56	.64
rganic heart disease	47	.53

DEATHS FROM ALL CAUSES.

Chart E shows the total death rate for all causes for the Army from the year 1905 to 1914, inclusive. (See also Table 3A.)

For American troops, enlisted, the total rate for 1914 was 4.45 as compared with the corresponding rate of 4.86 for 1913 and 4.79 for 1912. The rate for 1914 is the lowest on record in the Army. The highest death rate occurring in any year was in 1849, when the total rate for deaths was 80.2. The death rate for diseases was 2.36 in 1914; in 1913 it was 2.57. The total number of deaths in 1914 was 392. The following diseases caused the highest number of deaths absolute numbers and rates per 1,000 being given:

Deaths, enlisted men (American troops).

Disease.	Number.	Rate.
Tuberculosis	41	0.47
Pneumonia (lobar)	15	.17
Organic heart disease	15	.17
Appendicitis and typhlitis	13	.15
Cancer	10	.11

The following were the principal causes of deaths, among officers and enlisted men, American troops, from external causes, with the number in each instance: Suicides, 44; homicides, 25; drowning, accidental, 49; traumatism by fall, 7; traumatism by other crushing, 16; traumatism by firearms, 14.

INFLUENCE OF STATION ON TROOPS.

Regarding the comparative healthfulness of the various countries in which troops were serving during the year (Army transports being excluded), it will be noted that Alaska maintains the lowest admission and noneffective rates; Hawaii the lowest death rate, and China the lowest discharge rate. Panama had the highest noneffective rate, and China the highest admission rate; the United States the highest discharge rate, and Alaska the highest death rate.

Chart D.

Discharge rates, All Causes, for The Army, {Total for American and Native enlisted men} years, 1905–1914.

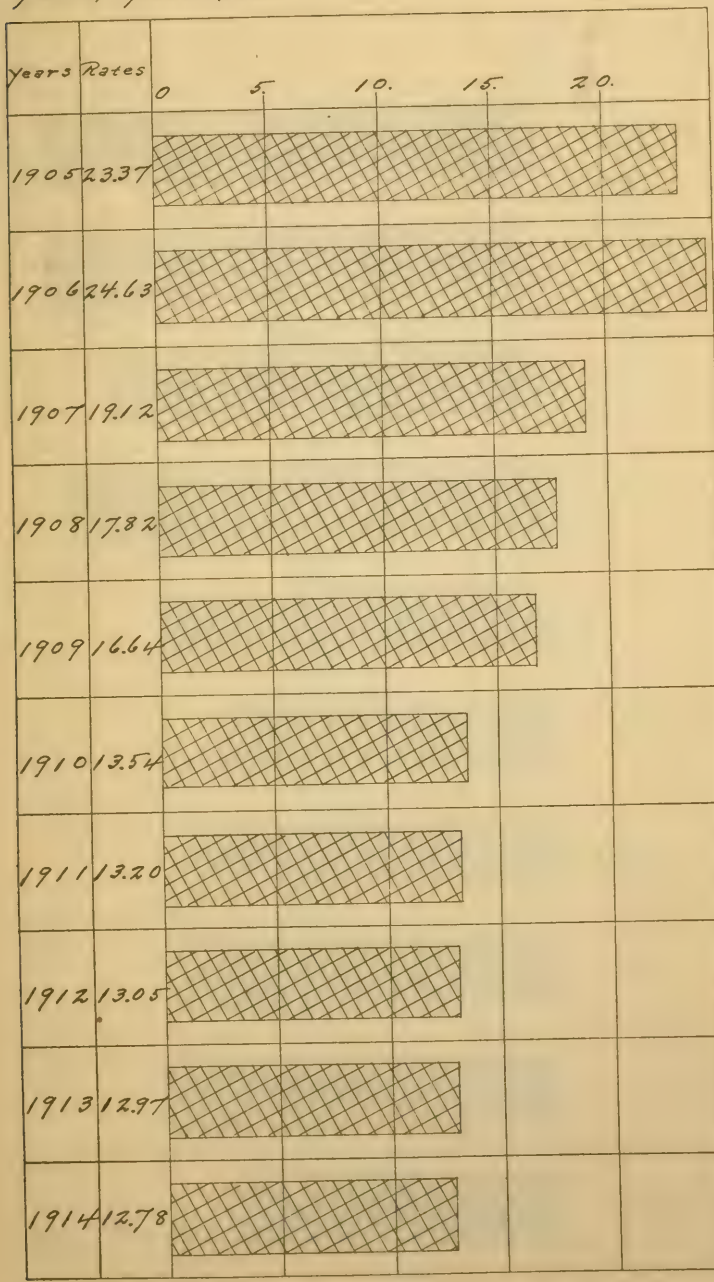


Chart E.

Death rates, All Causes, for The Army,
{Officers, and American and Native enlisted men} Years, 1905-1914

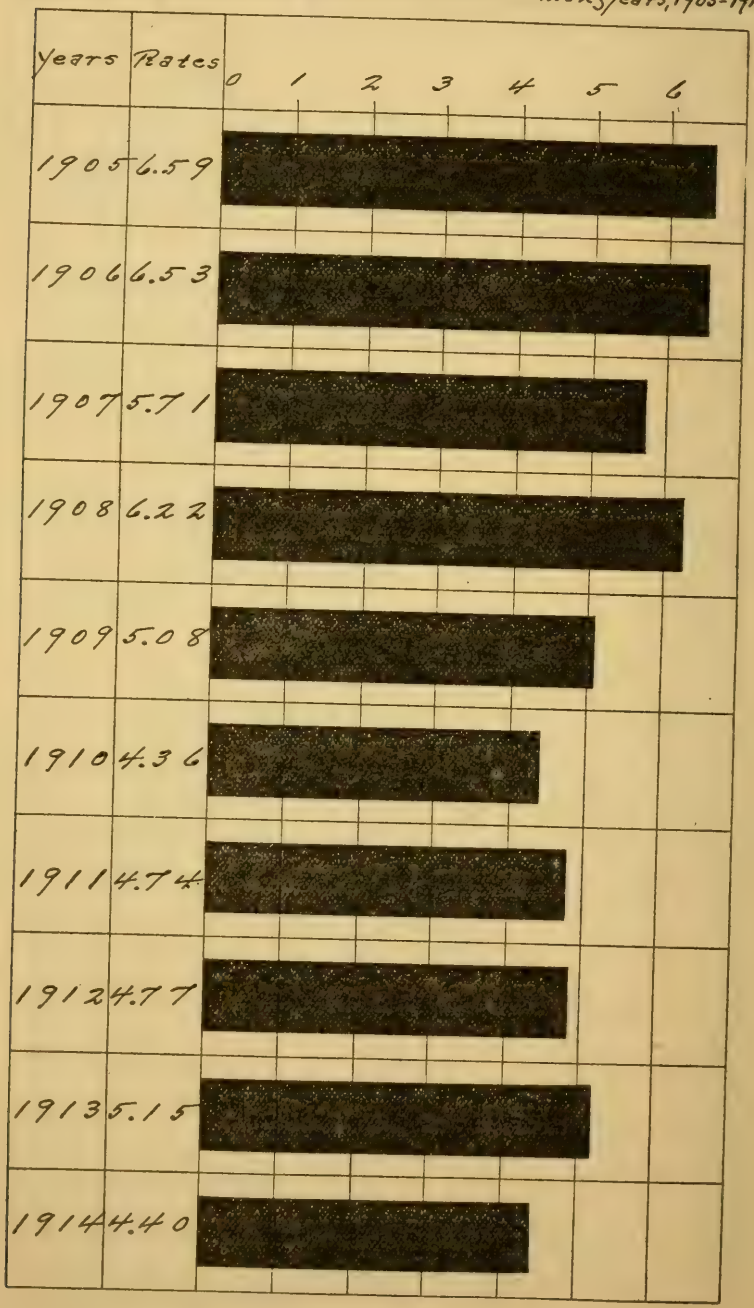


Chart F.

Death, Discharge, and Noneffective rates for Disease for The Army, {Officers, and American and Native enlisted men} years, 1905-1914.

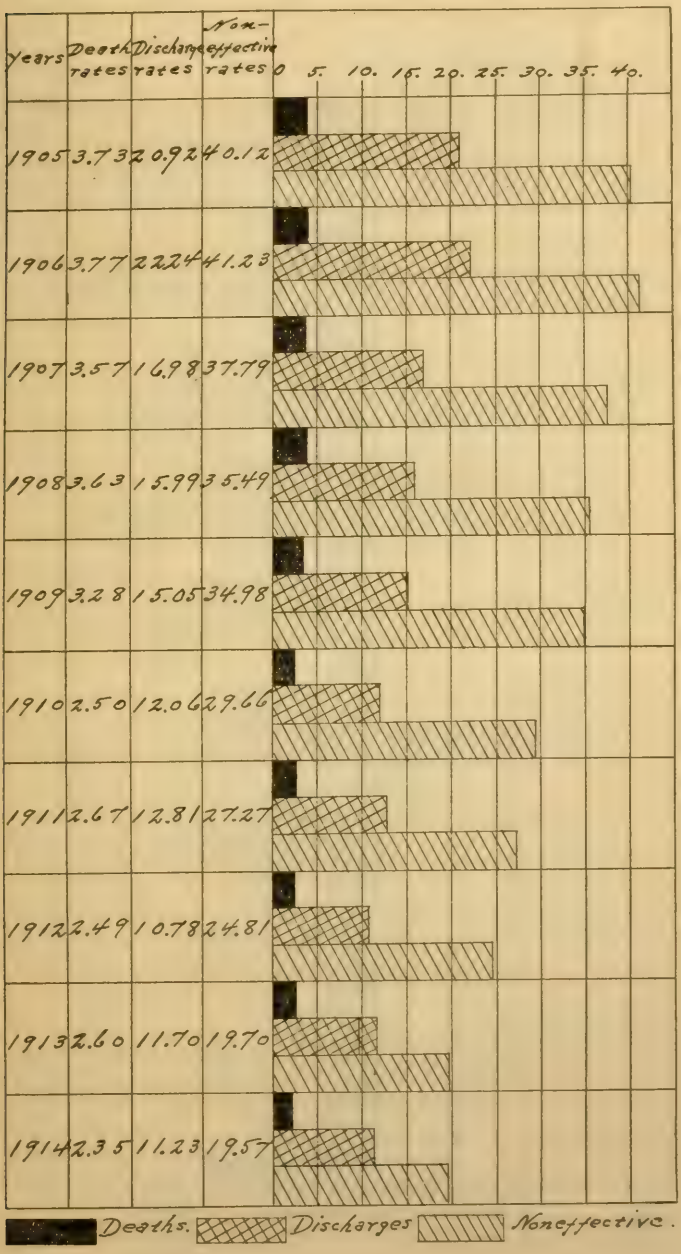


Chart G.

Total Losses, All Causes, The Army, {Officers, and American and Native enlisted men} years, 1905–1914.

Years	Death rates.	Retired and Discharge rates.	Total losses.
1905	6.59	22.51	29.10
1906	6.53	23.84	30.37
1907	5.71	18.53	24.24
1908	6.22	17.56	23.78
1909	5.08	16.40	21.48
1910	4.36	13.25	17.61
1911	4.74	12.84	17.58
1912	4.77	12.61	17.38
1913	5.15	12.68	17.83
1914	4.40	12.46	16.86

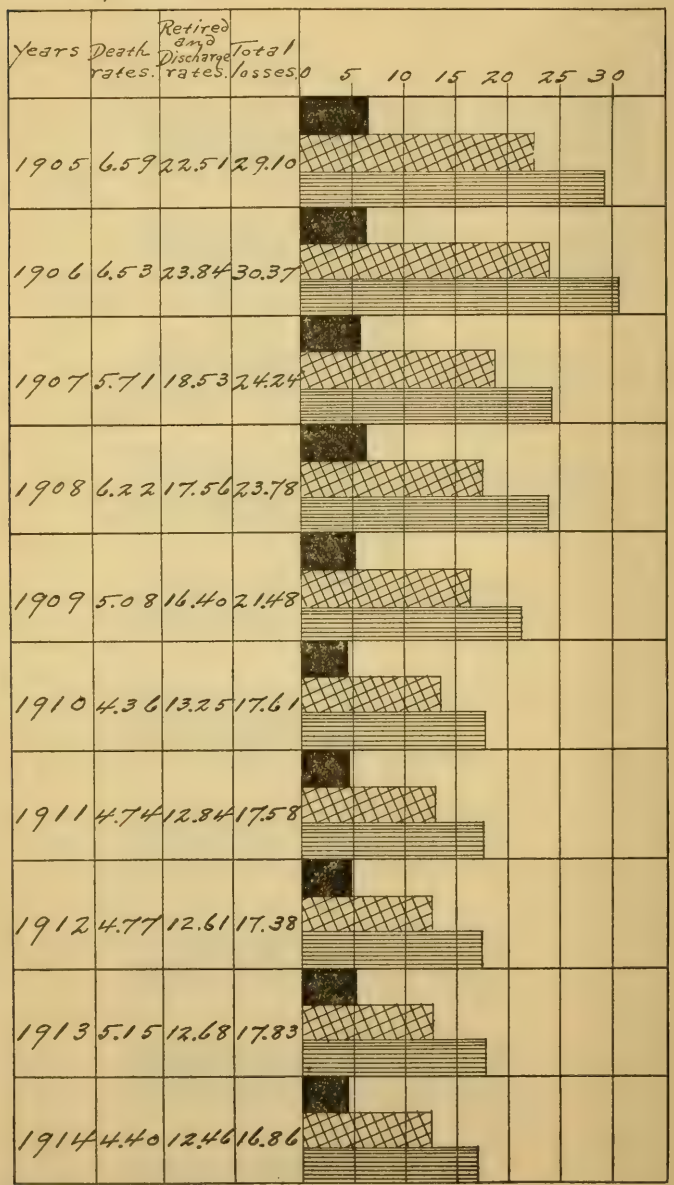


Chart H.

Admission, Discharge, Death, and Noneffective rates for Disease, by countries, of Officers, American, and Native enlisted men; year, 1914.

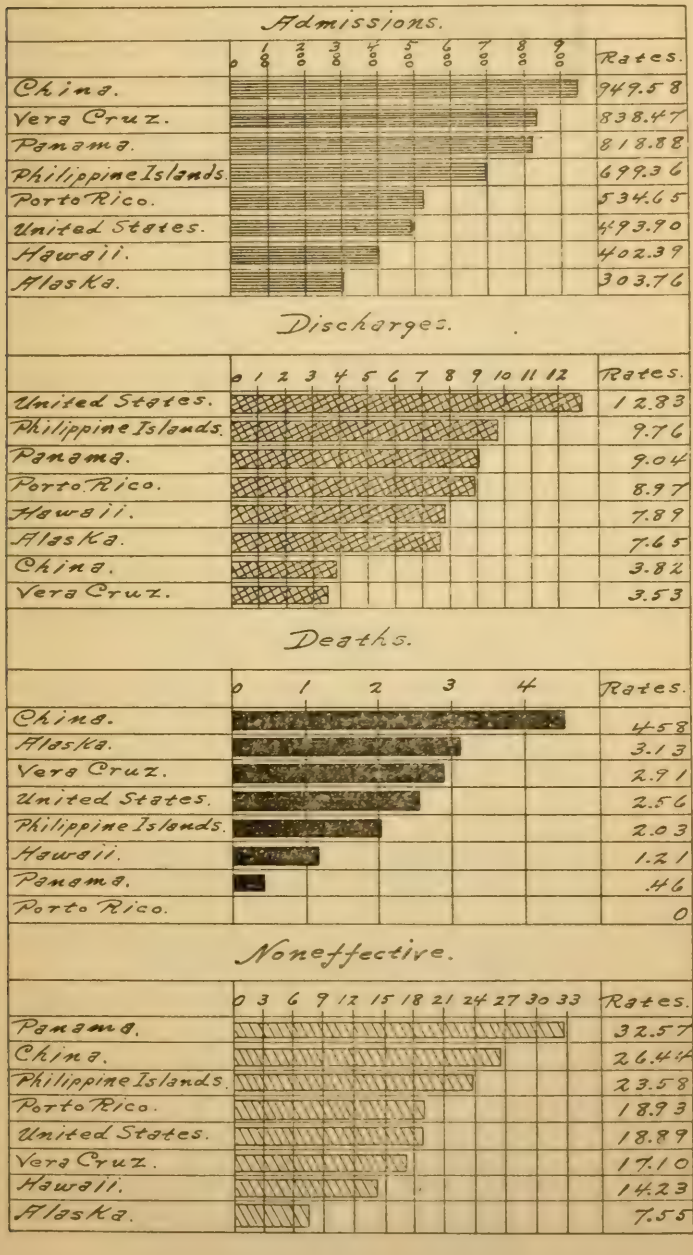


TABLE No. 3.—*Numerical view of the effect of disease and injury on United States troops, serving at home and abroad, in the year 1914, compared with corresponding data for the year 1913, by countries (enlisted men only).*

ABSOLUTE NUMBERS.

American troops (enlisted men).		Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Noneffective from sickness.	
			Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Days treated.	Constantly noneffective.
United States	1914	61,362	38,648	30,609	8,039	917	794	123	298	156	142	1,215	950	265	523,307	1,433.72
	1913	59,608	36,951	29,085	7,866	810	718	92	298	158	140	1,108	876	232	499,044	1,367.24
Alaska	1914	915	387	288	99	8	7	1	8	3	5	16	10	6	3,515	9.63
	1913	1,141	565	404	161	11	10	1	5	2	3	16	12	4	5,672	15.54
Philippine Islands	1914	10,253	8,999	7,655	1,344	112	108	4	40	21	19	152	129	23	114,155	313.58
	1913	11,188	10,316	8,685	1,631	161	153	8	53	29	24	214	182	32	126,241	345.87
China	1914	1,047	1,131	1,012	119	4	4	.....	6	5	1	10	9	1	11,344	31.08
	1913	1,216	1,108	918	190	6	6	.....	11	5	6	17	11	6	11,942	32.72
Hawaii	1914	7,971	4,171	3,204	967	72	63	9	13	9	4	85	72	13	54,544	149.44
	1913	6,130	4,301	3,228	1,073	63	59	4	23	13	10	86	72	14	54,103	148.23
Canal Zone	1914	2,010	1,920	1,678	242	23	19	4	7	1	6	30	20	10	27,367	74.98
	1913	797	680	594	86	31	29	2	5	1	4	36	30	6	8,793	24.09
Vera Cruz, Mexico	1914	2,266	2,142	1,954	188	8	8	.....	14	7	7	22	15	7	16,590	45.45
Army transports	1914	1,404	681	656	25	1	1	.....	6	6	.....	7	7	.....	13,761	37.70
	1913	686	336	317	19	.....	.....	.....	2	2	.....	2	2	.....	11,354	31.11
Total	1914	**87,228**	**58,079**	**47,056**	**11,023**	**1,145**	**1,004**	**141**	**392**	**208**	**184**	**1,537**	**1,212**	**325**	**764,883**	**2,095.57**
	1913	80,766	54,257	43,231	11,026	1,082	975	107	397	210	187	1,479	1,185	294	717,149	1,964.79
Regular Army. American troops 1903 to 1912		65,580	746,308	612,988	133,320	12,658	11,384	1,274	3,913	2,315	1,598	16,571	13,699	2,872	10,203,035	2,793.06
Porto Rican troops	1914	669	421	367	54	6	6	.....	3	.....	3	9	6	3	5,499	15.07
	1913	594	486	434	52	5	4	1	2	2	.....	7	6	1	5,329	14.60
Philippine Scouts	1914	5,020	3,585	3,104	481	48	44	4	16	11	5	64	55	9	37,189	101.89
	1913	5,096	3,471	2,983	488	48	45	3	48	14	34	96	59	37	34,050	93.29

PROPORTIONATE NUMBERS (ENLISTED MEN ONLY).

[Ratios per 1,000 of mean strength.]

American troops (enlisted men).	Mean strength.	Admitted.			Discharge on certificate of disability.			Died.			Total losses.			Constantly noneffective.	Days treated.	
		Total.	Disease.	Injury	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.		Each soldier.	Each case.
United States	1914	61,362	629.84	498.83	131.01	14.82	12.83	1.99	4.82	2.52	2.30	19.64	15.35	4.29	23.37	8.53	13.54
	1913	59,608	619.90	487.94	131.96	13.45	11.92	1.53	4.95	2.62	2.33	18.40	14.54	3.86	22.94	8.37	13.51
Alaska	1914	915	422.95	314.75	108.20	8.74	7.65	1.09	8.74	3.28	5.46	17.48	10.93	6.55	10.52	3.84	9.08
	1913	1,141	495.18	354.08	141.10	9.64	8.76	.88	4.38	1.75	2.63	14.02	10.51	3.51	13.62	4.97	10.04
Philippine Islands	1914	10,253	877.69	746.61	131.08	10.62	10.24	.38	3.79	1.99	1.80	14.41	12.23	2.18	30.58	11.16	12.72
	1913	11,188	922.06	776.28	145.78	14.14	13.44	.70	4.66	2.55	2.11	18.80	15.99	2.81	30.91	11.28	12.24
China	1914	1,047	1,080.23	966.57	113.66	3.82	3.82	.....	5.73	4.78	.96	9.55	8.60	.96	29.68	10.83	10.03
	1913	1,216	911.18	754.93	156.25	4.93	4.93	.....	9.05	4.11	4.93	13.98	9.04	4.93	26.91	9.82	10.78
Hawaii	1914	7,971	523.27	401.96	121.31	9.02	7.89	1.13	1.63	1.13	.50	10.65	9.02	1.63	18.75	6.84	13.08
	1913	6,130	701.63	526.59	175.04	10.07	9.43	.64	3.67	2.08	1.60	13.74	11.51	2.24	24.18	8.63	12.58
Canal Zone	1914	2,010	955.22	834.83	120.40	10.94	9.04	1.90	3.33	.48	2.85	14.27	9.52	4.75	37.30	13.62	14.25
	1913	797	853.20	745.29	107.90	38.90	36.39	2.51	6.27	1.25	5.02	45.17	37.64	7.53	20.23	11.03	12.93
Vera Cruz, Mexico	1914	2,266	945.28	862.31	82.97	3.53	3.53	.....	6.18	3.09	3.09	9.71	6.62	3.09	20.06	7.32	7.75
Army transports	1914	1,404	485.04	467.24	17.81	.71	.71	.....	4.27	4.27	.....	4.98	4.98	.....	26.85	9.80	20.21
	1913	686	489.80	462.10	27.70	.....	.....	.....	2.92	2.92	.....	2.92	2.92	.....	45.35	.....	.....
Total	1914	**87,228**	**665.83**	**539.46**	**126.37**	**12.99**	**11.39**	**1.60**	**4.45**	**2.36**	**2.09**	**17.44**	**13.75**	**3.69**	**24.02**	**8.77**	**13.17**
	1913	80,766	671.78	535.26	136.52	13.24	11.93	1.31	4.86	2.57	2.29	18.10	14.50	3.60	24.33	8.88	13.22
Regular Army, American troops, 1903 to 1912		65,580	1,138.00	934.71	203.29	18.97	17.06	1.91	5.86	3.47	2.39	24.83	20.53	4.30	42.59	15.56	13.67
Porto Rican troops	1914	669	629.30	548.58	80.72	8.97	8.97	.....	4.48	.....	4.48	13.45	8.97	4.48	22.52	8.22	13.06
	1913	594	818.18	730.64	87.54	8.42	6.73	1.68	3.37	3.37	.....	11.79	10.10	1.68	24.58	8.97	10.97
Philippine Scouts	1914	5,020	714.14	618.33	95.82	9.56	8.76	.80	3.19	2.19	1.00	12.75	10.95	1.80	20.30	7.41	10.37
	1913	5,096	681.12	585.36	95.76	9.17	8.59	.57	9.17	2.67	6.49	18.34	11.27	7.07	18.31	6.68	9.81

NOTE.—See Tables 3a and 68½ to 75 for inclusion of officers and Table 76 for enlisted men only. Tables 68½ to 76 also give rates for all principal diseases.

TABLE NO. 3A.—*Numerical view of the effect of disease and injury on the Army, serving at home and abroad, in the year 1914, compared with corresponding data for the year 1913, by countries (officers and enlisted men, Porto Ricans and Philippine Scouts).*

PROPORTIONATE NUMBERS (ENTIRE ARMY).

[Ratios per 1,000 of mean strength.]

The Army, officers and enlisted men, including Porto Ricans and Philippine Scouts.		Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Noneffective from sickness.		
			Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Constantly noneffective.	Days treated.	
																Each soldier.	Each case.
United States	1914	64,357	622.28	493.90	128.38	14.82	12.83	1.99	4.87	2.56	2.31	19.69	15.39	4.30	23.41	8.54	13.73
	1913	62,729	613.16	482.79	130.37	13.45	11.92	1.53	4.96	2.64	2.32	18.41	14.56	3.85	23.04	8.41	13.72
Alaska	1914	958	408.14	303.76	104.38	8.74	7.65	1.09	8.35	3.13	5.22	17.09	10.78	6.31	10.17	3.71	9.09
	1913	1,201	486.26	348.87	137.38	9.64	8.76	.88	5.00	2.50	2.50	14.65	11.26	3.38	13.24	4.83	4.28
Philippine Islands	1914	15,943	818.04	699.36	118.67	10.28	9.76	.51	3.50	2.03	1.47	13.78	11.79	1.98	27.20	9.93	12.14
	1913	16,940	840.08	711.16	128.93	12.58	11.91	.66	6.17	2.54	3.63	18.75	14.45	4.29	26.87	9.81	11.67
China	1914	1,091	1,063.24	949.58	113.66	3.82	3.82	.....	5.50	4.58	.92	9.32	8.40	.92	28.88	10.54	9.92
	1913	1,262	901.74	748.81	152.93	4.93	4.93	.....	8.71	3.96	4.75	13.64	8.89	4.75	26.48	9.66	10.72
Hawaii	1914	8,268	523.58	402.39	121.19	9.02	7.89	1.13	1.81	1.21	.60	10.83	9.10	1.73	18.69	6.82	13.03
	1913	6,398	697.41	525.18	172.24	10.07	9.43	.64	3.51	1.99	1.53	13.58	11.42	2.17	23.85	8.71	12.48
Canal Zone	1914	2,076	938.35	818.88	119.46	10.94	9.04	1.90	3.21	.46	2.75	14.15	9.50	4.65	36.45	13.30	14.18
	1913	841	845.42	737.22	108.20	38.90	36.39	2.51	8.32	2.38	5.95	47.22	38.77	8.46	29.58	10.80	12.77
Vera Cruz, Mexico	1914	2,402	918.82	838.47	80.35	3.53	3.53	.....	5.83	2.91	2.91	9.36	6.44	2.91	19.54	7.13	7.76
Porto Ricans	1914	707	615.28	534.65	80.62	8.97	8.97	.....	4.24	.....	4.24	13.21	8.97	4.24	21.64	7.90	12.84
	1913	634	801.26	711.36	89.91	8.42	6.73	1.68	3.15	3.15	.....	11.57	9.88	1.68	24.01	8.76	10.94
Transports	1914	1,476	465.45	448.51	16.94	.71	.71	.....	4.07	4.07	.....	4.78	4.78	.....	26.47	9.66	20.76
	1913	747	453.82	428.38	25.44	.....	.....	.....	4.02	4.02	.....	4.02	4.02	.....	43.49	.....	.....
The Army	1914	**97,278**	**660.45**	**538.09**	**122.36**	**12.78**	**11.23**	**1.55**	**4.40**	**2.35**	**2.05**	**17.18**	**13 58**	**3.60**	**23.78**	**8.68**	**13.14**
	1913	90,752	665.95	533.84	132.11	12.97	11.70	1.27	5.15	2.60	2.55	18.12	14.30	3.82	23.97	8.75	13.14

INFLUENCE OF ARMS OF SERVICE.

The admission rate for disease was highest for the Field Artillery, 639.41; and the lowest for the Signal Corps, 430.65; the death rate was highest in the Hospital Corps, 4.23; and lowest in the Engineers, 1.17.

TABLE No. 4.—*Influence of disease on enlisted American troops of the Army, by arms of service, for the year 1914.*

	Mean strength.	Admitted.	Discharged on certificate of disability.	Died.	Constantly non-effective.	Ratio per 1,000 of mean strength.			
						Admitted.	Discharged on certificate of disability.	Died.	Constantly non-effective.
Infantry	30,308	16,882	371	71	653.63	557.01	12.12	2.32	21.57
Cavalry	13,877	7,691	119	31	295.45	554.95	8.48	2.21	21.29
Coast Artillery	17,450	7,732	223	37	266.71	443.09	12.65	2.10	15.28
Field Artillery	4,917	3,144	56	7	117.81	639.41	11.27	1.41	23.96
Engineers	1,692	1,029	25	2	41.93	608.16	14.62	1.17	24.78
Ordnance	717	312	1	1	10.14	435.15	1.38	1.38	14.14
Signal Corps	1,240	534	11	2	19.27	430.65	8.80	1.60	15.54
Hospital Corps	3,742	1,951	49	16	79.09	521.38	12.96	4.23	21.14
Others	13,285	7,781	149	41	236.41	585.70	11.10	3.05	17.79
Total	87,228	47,056	1,004	208	1,720.48	539.46	11.39	2.36	19.73

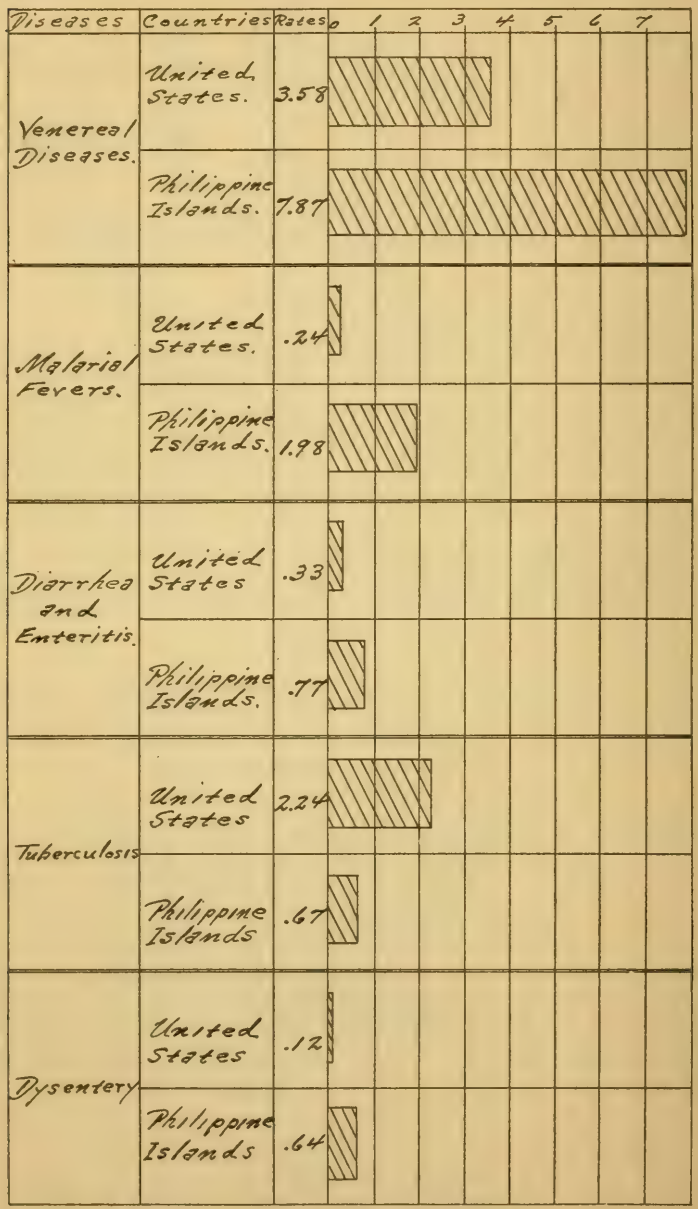
The following table shows the relative frequency of the occurrence of the more important diseases for the various arms of the service, figure 1 indicating the highest ratio and figure 8 the lowest in each case for each arm:

TABLE No. 5.—*Relative frequency of occurrence of certain important diseases, by arms of service, in the Army, among American troops, enlisted men, year 1914.*

Arms of service.	Most important diseases.											
	Venereal.	Tonsilitis and pharyngitis.	Diarrhea and enteritis.	Malaria.	Bronchitis.	Alcoholism.	Rheumatism, articular.	Dysentery.	Tuberculosis.	Typhoid fever.	Pneumonia (lobar).	Injuries.
Infantry	3	5	7	7	3	4	3	3	2	.....	4	7
Cavalry	5	1	1	3	4	8	1	2	5	.....	1	2
Coast Artillery	7	4	6	5	7	6	2	7	5	1	6	6
Field Artillery	2	2	2	2	6	7	7	6	3	.....	2	1
Engineers	1	6	5	1	2	2	6	1	7	.....	5	4
Ordnance	8	8	8	6	1	3	8	8	8	.....	8	3
Signal Corps	4	7	4	4	8	5	4	5	4	.....	7	5
Hospital Corps	6	3	3	8	5	1	5	4	1	2	3	8

Chart I.

Noneffective rates for certain Special Diseases for the United States and Philippine Islands {Officers, American and Native enlisted men} year, 1914.



Above figures for the United States include the time lost by cases invalided home from insular possessions.

Chart I[4].

Malarial Fevers.
Admission Rates.

Admission rates for Malarial Fevers, for the Army {Officers, and American and Native enlisted men} years, 1905-1914.

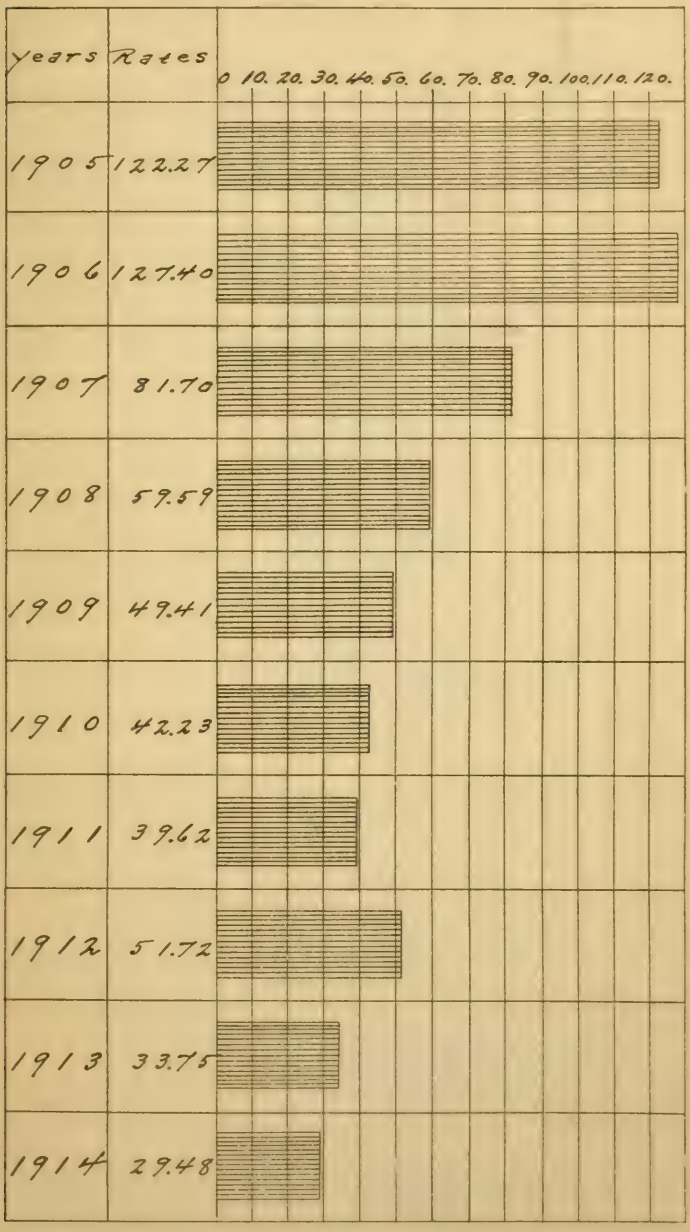


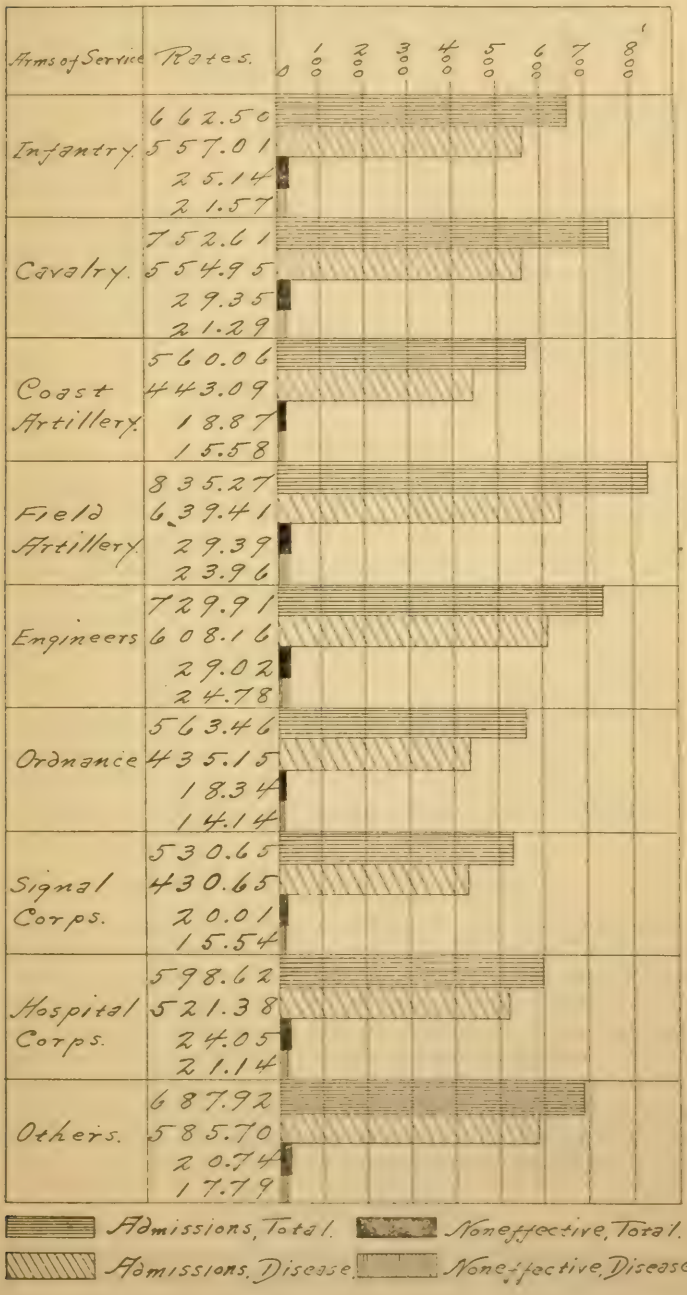
Chart K.

Malarial Fevers.
Noneffective Rates.

Noneffective rates for Malarial Fevers, for The Army {Officers, and American and Native enlisted men} years, 1905–1914.

Chart L

Admission and Noneffective rates for All Causes and Disease for The Army & American enlisted men, by Arms of Service, year, 1914.



The following tabulation shows the admission rates for the different races for eight of the more important causes of nonefficiency:

Admission rates for diseases causing greatest amount of nonefficiency.

	Venereal diseases.	Alcoholism.	Tuberculosis.	Dysentery.	Rheumatism (articular).	Diarrhea and enteritis.	Mental alienation.	Malarial fevers.
White enlisted men..	109.48	15.58	3.19	3.12	5.70	31.14	4.18	20.66
Colored enlisted men.	128.70	5.29	5.66	6.39	5.29	35.05	4.20	11.32
Porto Rican native troops.....	70.25	.....	1.49	7.47	10.46	38.87	.....	15.45
Philippine Scouts....	57.57	.60	6.57	8.96	2.99	26.49	2.79	201.80

It will be seen by the above tabulation that the white troops have, as usual, the highest rate for alcoholism; the Philippine Scouts the highest rate for malaria, probably due to the intimate participation in the native life, which takes them more out of the barracks; the colored troops have the highest venereal rate, and the Porto Ricans the highest rate for articular rheumatism.

INFLUENCE OF RACE.

[See Tables 67, 69, and 75.]

The tables show that the colored troops had the highest noneffective, death, and discharge rates; the Porto Rican troops had the lowest admission rates and the second highest death rate. The white troops had the second highest admission and discharge rates, and the Philippine Scouts had the highest admission rate. The constant noneffective rates were: Colored, 27.17; white, 23.81; Porto Rican, 22.52; Philippine, 20.30. The case admission rates were: Philippine, 714.14; white, 667.79; colored, 636.55; Porto Rican, 629.30. The discharge rates were: Colored, 14.42; white, 12.90; Philippine, 9.56; Porto Rican, 8.97. The death rates were: Colored, 5.29; Porto Rican, 4.48; white, 4.39; Philippine, 3.19. The rates for total losses were: Colored, 19.71; white, 17.29; Porto Rican, 13.45; Philippine, 12.75. The average number of days lost for each case treated was: Colored, 15.58; Porto Rican, 13.06; white, 13.02; Philippine, 10.37.

COMPARISON WITH FOREIGN ARMIES.

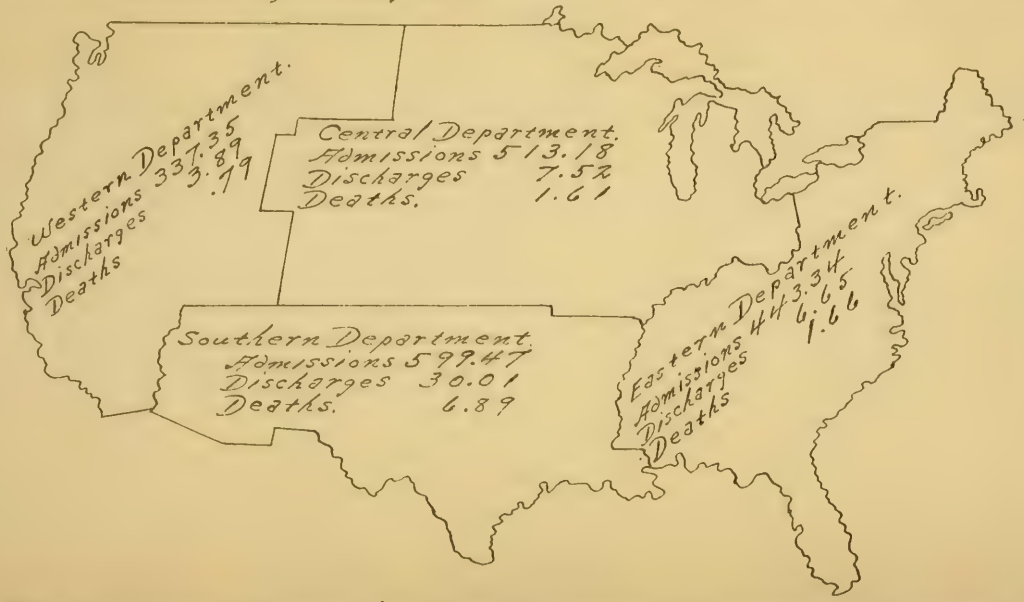
It has been customary to make an effort to compare the health conditions in the United States Army with the same conditions in the armies of Great Britain, the continental powers, and Japan. It is doubtful whether any comparisons made from the data furnished this office in the health reports from the countries mentioned are of any value. The conditions under which the sick are treated and records made of disease in the different armies are so different that no comparison of general rates of admission, noneffectiveness, etc., are worth making. Owing to the unusual conditions in Europe, no effort at comparison is made in this report.

SURGICAL OPERATIONS.

Table No. 66 shows the principal surgical operations performed by medical officers upon officers and enlisted men. Operations upon families of officers and enlisted men and other civilians who are

entitled to treatment at Army posts are not included. In 5,604 operations performed, 51 were failures and 27 deaths occurred. Ether was the anesthetic used in 2,375 cases, chloroform in 231, local anesthesia in 2,343, no anesthetic in 572, chloroform and ether or gas in 52, and other general anesthetics in 31 cases. Five hundred and ten appendectomies were performed and 325 herniotomies. There were two deaths following operations for appendicitis. Four operations for goiter were performed.

Military Departments, United States, continental {excluding Alaska} showing the relative Admission, Discharge, and Death rates for Disease, Officers and Enlisted men, year, 1914.



Note: Above figures do not include General Hospitals, Recruit Depots, Independent Stations, and Infantry and Cavalry Divisions on the Mexican Border.

UNITED STATES (CONTINENTAL) EXCLUSIVE OF ALASKA.

ADMISSION RATE.

Cases only are counted; readmissions for the same illness are omitted in counting cases. Table No. 81 shows case admissions and total admissions for enlisted American troops of the Army for the United States and American troops, Philippine Islands, 1904 to 1911, inclusive.

Year.	Case admission rate.			Non-effective rate, all causes.	Highest noneffective rate for disease.	
	All causes.	For disease.	External causes.		Venereal.	Tuberculosis.
1914	629.84	498.83	131.01	23.37	3.75	2.23
1913	619.90	487.94	131.96	22.94	3.58	2.34
1912	738.70	596.94	141.76	27.15	5.96	1.65
1911	837.00	680.00	157.00	31.40	8.82	1.63
1910	840.00	662.00	178.00	33.95	10.14	1.87
1909	945.00	750.00	195.00	39.70	11.44	3.33

The admission rate for 1914, 629.84, is slightly higher than for the preceding year; this rate is compared with the rate for five years preceding in the total above.

DISCHARGES FOR DISABILITY.

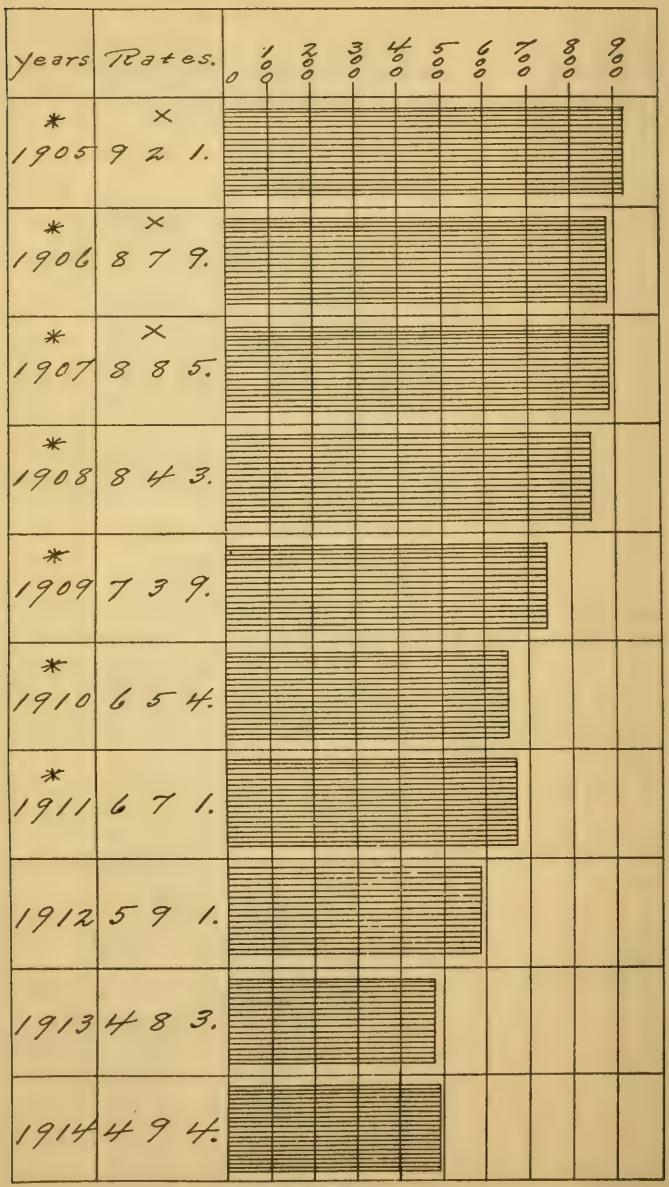
The disability discharge rate for the United States for 1914 was 14.82 per 1,000, as compared with 13.45 for 1913, 14.48 for 1912, 15 for 1911, 15.28 for 1910, and 18.87 for 1909. The rate is higher than for two years. Whether the change in policy of the War Department by which these discharges are made is responsible or not can not yet be determined.

TABLE NO. 7.—*Discharges for disability, year 1914, United States, continental (excluding Alaska).*

Causes of discharge.	Number discharged.	Percentage of total discharges for diseases or external causes.	Discharges for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty.
DISEASE.							
Nervous system and organs of special sense	308	38.79	45	251	12	5	47
Mental alienation	187	23.55	21	158	8	1	30
Dementia precox	98	12.34	14	84	.....	.....	9
Defective mental development	58	7.30	.....	58	.....	.....	14
General paralysis of the insane	8	1.01	.....	1	7	.....	1
Psychosis, maniac depressive	7	.88	2	5	.....	.....	1
Psychosis, traumatic	1	.13	1	.....	.....	.....	.....
All other forms	15	1.89	4	10	1	1	5

Chart M.

Admission rates for Disease {Officers and enlisted men} for the United States, years, 1905–1914.



*Excess of cases deducted to correspond with years preceding 1905, and 1912 to 1914.
× Enlisted men. Officers not included.

Chart N

Discharge rates, All Causes, for the United States. American enlisted men, years, 1905-1914.

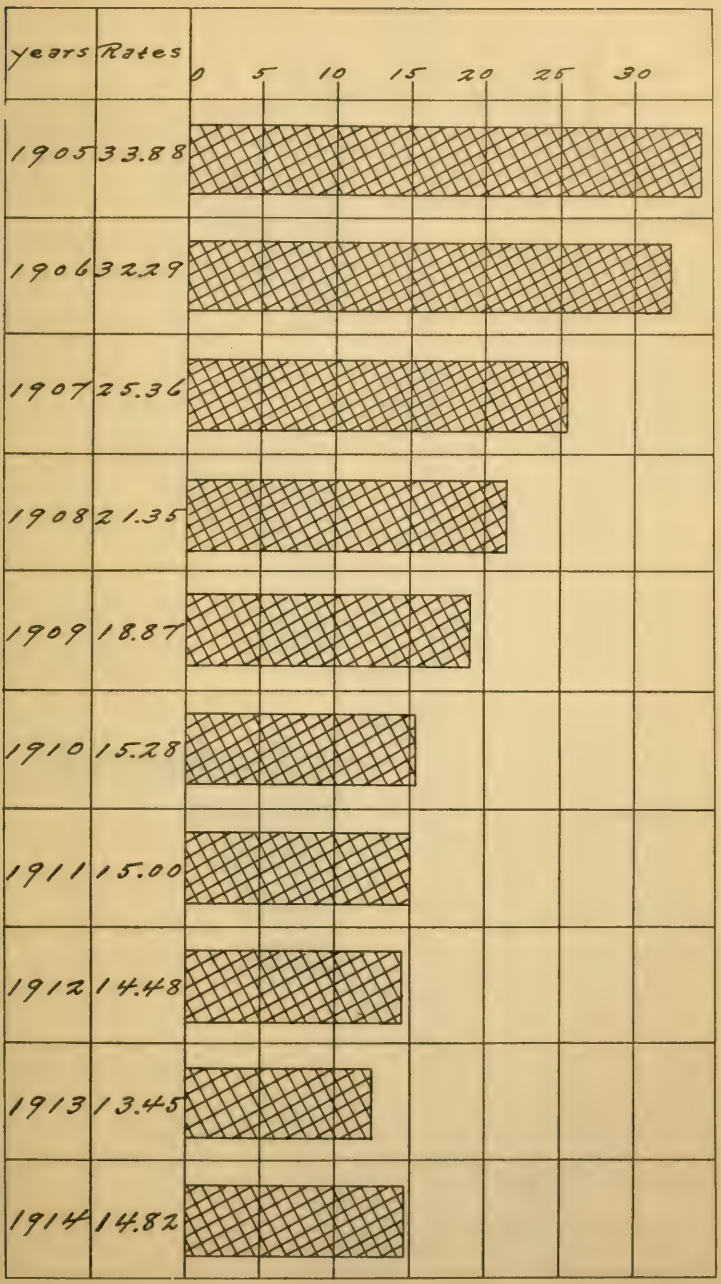


Chart O.

Admission, Discharge, Death and Noneffective rates for Diseases having the highest rates for The United States {enlisted men} year, 1914.

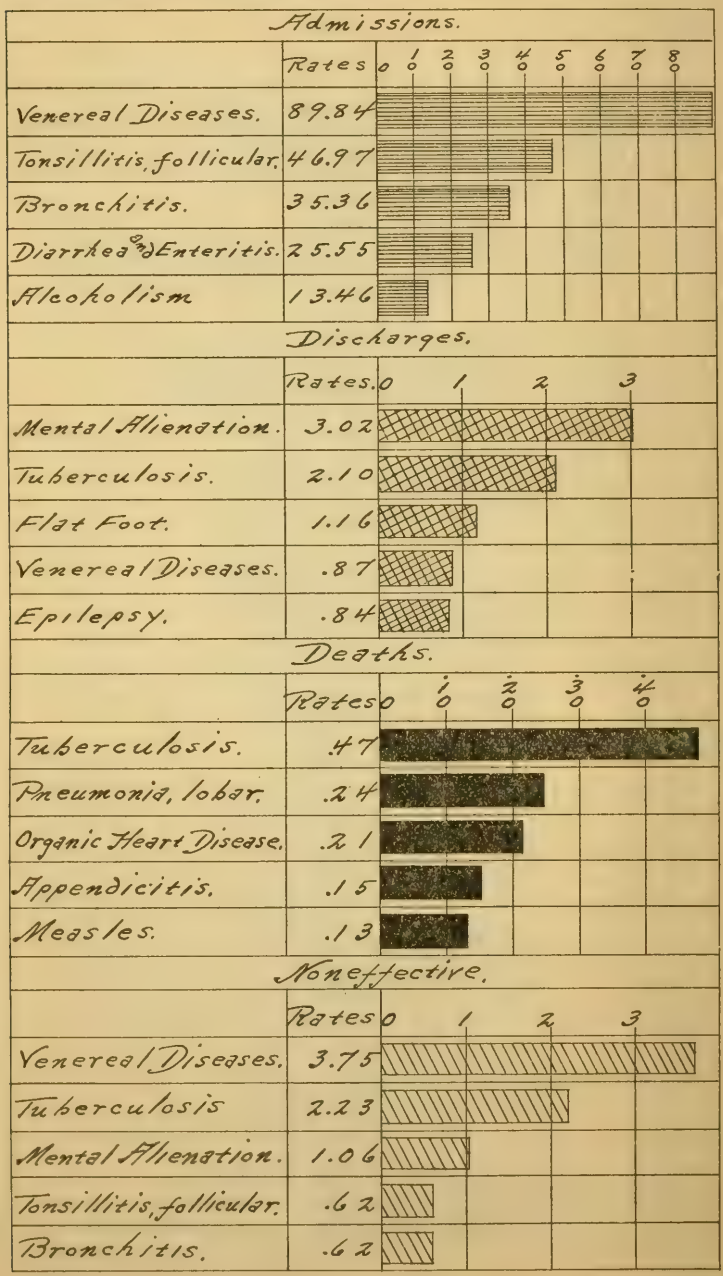


TABLE No. 7.—*Discharges for disability, year 1914, United States, continental (excluding Alaska)*—Continued.

Causes of discharge.	Number discharged.	Percentage of total discharges for diseases or external causes.	Discharges for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty.
DISEASE—continued.							
Nervous system and organs of special sense—Continued.							
Epilepsy	52	6.55	1	51	.....	.....	11
Others of the nervous system	18	2.27	2	15	1	.....	1
Neurasthenia	14	1.76	2	12	.....	.....	1
Others	4	.50	.....	3	1	.....	.....
Diseases of the eyes	16	2.02	9	6	1	.....	.....
Amblyopia	4	.50	1	2	1	.....	.....
Cataract	3	.38	3	.....	.....	.....	.....
Iritis	2	.25	2	.....	.....	.....	.....
Retinitis	2	.25	1	1	.....	.....	.....
Others	2	.25	1	1	.....	.....	.....
Trachoma	1	.13	.....	1	.....	.....	.....
Astigmatism	1	.13	.....	1	.....	.....	.....
Choroiditis	1	.13	1	.....	.....	.....	.....
Neuralgia and neuritis	14	1.76	2	12	.....	.....	4
Hysteria	12	1.51	.....	12	.....	.....	4
Neuralgia	1	.13	1	.....	.....	.....	.....
Neuritis	1	.13	1	.....	.....	1	.....
Otitis media	10	1.26	5	5	.....	.....	.....
Epidemic cerebrospinal meningitis	3	.38	3	.....	.....	3	.....
Multiple spinal sclerosis	2	.25	1	1	.....	.....	.....
Locomotor ataxia	2	.25	.....	.....	2	.....	.....
Cerebral hemorrhage	1	.13	.....	1	.....	.....	.....
Paralysis, cause undetermined	1	.13	1	.....	.....	1	.....
Chorea	1	.13	.....	1	.....	.....	1
Psychosis hysterical	1	.13	.....	1	.....	.....	.....
General diseases	228	28.71	122	64	42	.....	18
Tuberculosis	130	16.37	107	23	.....	.....	7
Of the lungs	120	15.11	101	19	.....	.....	5
Of other organs	5	.63	3	2	.....	.....	1
Of the pleura	2	.25	1	1	.....	.....	.....
Abdominal	2	.25	1	1	.....	.....	1
Of the joints	1	.13	1	.....	.....	.....	.....
Venereal diseases	54	6.80	1	25	28	.....	9
Syphilis	34	4.28	.....	16	18	.....	6
Tertiary	21	2.64	.....	10	11	.....	1
Secondary	7	.88	.....	3	4	.....	2
Primary	3	.38	.....	.....	3	.....	2
Hereditary	2	.25	.....	2	.....	.....	.....
Period undetermined	1	.13	.....	1	.....	.....	1
Gonorrhea and results	20	2.52	1	9	10	.....	3
Arthritis, chronic	16	2.02	1	7	8	.....	3
Other infections	4	.50	.....	2	2	.....	.....
Alcoholism, chronic	12	1.51	.....	1	11	.....	1
Exophthalmic goitre	10	1.26	2	8	.....	.....	.....
Articular rheumatism	7	.88	6	1	.....	.....	.....
Acute	1	.13	1	.....	.....	.....	.....
Subacute	3	.38	3	.....	.....	.....	.....
Chronic	3	.38	2	1	.....	.....	.....
Diabetes	3	.38	2	1	.....	.....	1
Drug habit (all cocaine)	3	.38	.....	.....	3	.....	.....
Others	3	.38	.....	3	.....	.....	.....
Imperfect physical development	2	.25	.....	2	.....	.....	.....
Diabetes insipidus	1	.13	.....	1	.....	.....	.....
Dysentery, chronic entamebic	2	.25	1	1	.....	1	.....
Cancer	2	.25	2	.....	.....	.....	.....
Measles	1	.13	1	.....	.....	.....	.....
Tumors benign	1	.13	.....	1	.....	.....	.....
Diseases of the bones and of the organs of locomotion	101	12.72	21	79	1	.....	2
Flat foot	72	9.07	5	67	.....	.....	2
Diseases of the joints	18	2.27	12	5	1	.....	.....
Arthritis	11	1.39	9	2	.....	.....	.....
Synovitis	5	.63	2	2	1	.....	.....
Ankylosis	2	.25	1	1	.....	.....	.....

TABLE No. 7.—*Discharges for disability, year 1914, United States, continenl (excluding Alaska)*—Continued.

Causes of discharge.	Number discharged.	Per centage of total discharges for diseases or external calses.	Discharges for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty.
DISEASE—continued.							
Diseases of the bones and of the organs of locomotion—Continued.							
Hallux valgus	3	.38	1	2			
Diseases of the bones	4	.50	2	2			
Periostitis	2	.25		2			
Mastoiditis	1	.13	1				
Osteomyelitis	1	.13	1				
Others of the order	2	.25	1	1			
Dupuytrens contraction	1	.13	1				
Weak foot	1	.13		1			
Metatarsalgia	1	.13		1			
Rheumatism, chronic muscular	1	.13		1			
Diseases of the circulatory system	54	6.80	25	26	3	2	6
Organic heart disease	41	5.16	22	18	1	2	6
Valvular disease	33	4.16	18	15		2	6
Endocarditis, chronic	5	.63	3	1	1		
Others (cardiac neurosis, 1; arrhythmia cordis, 1)	2	.25		2			
Myocarditis, chronic	1	.13	1				
Diseases of the arteries	3	.38	2		1		
Aneurism	2	.25	1		1		
Arterial sclerosis	1	.13	1				
Diseases of the veins	4	.50		3	1		
Phlebitis, chronic	2	.25		1	1		
Hemorrhoids	1	.13		1			
Varicose veins	1	.13		1			
Other diseases of the circulatory system	5	.63	1	4			
Cardiac irritability	2	.25		2			
Tachycardia	2	.25	1	1			
Stokes-Adams disease	1	.13		1			
Angina pectoris	1	.13		1			
Genito-urinary system	40	5.04	11	29		1	10
Enuresis	22	2.77		22			5
Nephritis	13	1.64	9	4		1	2
Chronic interstitial	7	.88	5	2		1	
Chronic parenchymatous	6	.76	4	2			2
Pyelitis, chronic	2	.25	2				
Nephrolithiasis, chronic	1	.13		1			1
Cystitis, chronic	1	.13		1			1
Hydrocele	1	.13		1			1
Diseases of the digestive system	25	3.15	11	14			7
Hernia	9	1.13	1	8			5
Inguinal	8	1.01		8			5
Ventral	1	.13	1				
Appendicitis	4	.50	3	1			
Abdominal adhesions following operations	4	.50	1	3			1
Sprue	3	.38	3				
Gastric ulcer	1	.13		1			
Gastritis, chronic	1	.13	1				
Diarrhea and enteritis	2	.25	2				1
Gastro-enteritis, chronic	1	.13	1				
Ulcer of duodenum	1	.13	1				1
Perisplenitis, chronic	1	.13		1			
Diseases of the respiratory system	23	2.90	10	12	1	1	2
Asthma	12	1.51	5	7			1
Bronchitis, chronic	5	.63	2	2	1		
Pleurisy	3	.38	2	1		1	
Serofibrinous	2	.25	1	1		1	
Fibrinous, chronic	1	.13	1				
Rhinitis, atrophic, chronic	1	.13		1			
Goiter	1	.13		1			1
Pneumonia	1	.13	1				
Diseases of the skin and cellular tissues	10	1.26	4	6			
Eczema, chronic	2	.25	1	1			
Ulcers, chronic	2	.25	1	1			
Corns	2	.25		2			

ABLE No. 7.—*Discharges for disability, year 1914, United States, continental (excluding Alaska)*—Continued.

Causes of discharge.	Number discharged.	Percentage of total discharges for diseases or external causes.	Discharges for disability.				
			In line of duty.	Not in line of duty.		Discharged for disability before assignment.	
				Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty.
DISEASES—continued.							
iseases of the skin and cellular tissues—Continued.							
Keratosis	1	.13	.....	1	.....	.....	.....
Abscess, chronic	1	.13	1	.....	.....	.....	.....
Bromidrosis	1	.13	.....	1	.....	.....	.....
Psoriasis	1	.13	1	.....	.....	.....	.....
ngenital malformations	4	.50	.....	4	.....	.....	.....
nility	1	.13	1	.....	.....	.....	.....
Total for diseases	794	100.00	250	485	59	9	92
EXTERNAL CAUSES.							
ractures	46	37.40	39	.....	7	1	.....
unshot wounds	24	19.51	19	.....	5	.....	.....
econdary results of injuries	20	16.26	.....	20	.....	.....	1
islocations	6	4.88	5	.....	1	1	.....
ncised wounds	5	4.07	3	.....	2	.....	.....
ushing	5	4.07	5	.....	.....	.....	.....
ontusions	5	4.07	4	.....	1	1	.....
prains	4	3.25	4	.....	.....	.....	.....
urns	3	2.44	3	.....	.....	.....	.....
acerated wounds	2	1.63	1	.....	1	.....	.....
unctured wounds	1	.81	1	.....	.....	.....	.....
uscular strain	1	.81	1	.....	.....	.....	.....
uptured muscle	1	.81	1	.....	.....	.....	.....
Total for external causes	123	100.00	86	20	17	3	1
otal for disease	794	86.60	250	485	59	9	92
otal for external causes	123	13.41	86	20	17	3	1
Grand total	917	100.00	336	505	76	12	93

The principal causes of discharge with the percentage of the total umber of discharges for disease were, mental alienation, 23.35; uberculosis (all), 16.37; flat foot, 9.07; venereal diseases, 6.80; pilepsy, 6.55; and organic diseases of the heart, 5.16. The order f frequency was the same for these diseases as in the years 1912 and 913, except that flat foot changed places with venereal diseases.

DEATHS.

The death rate for diseases for the United States enlisted men was .52 per 1,000 as compared with 2.62 in 1913 and 2.28 in 1912. That or external causes was 2.30 in 1914, 2.33 in 1913, and 2.28 in 1912. The total for diseases and external causes was 4.82 in 1914, as compared with 4.95 in 1913, and 4.55 in 1912. The total number of eaths in 1914 was 298; of this number 156 were due to disease, and 42 to external causes. Deaths, as well as discharges, which occurred n the United States among those who have been invalided home rom their commands in foreign service, have been charged to the ountry where such commands were stationed. Tuberculosis caused

29 deaths in 1914, 24 in 1913, and 16 in 1912; measles, 8 in 1914, 1 in 1913, and 12 in 1912; pneumonia (lobar), 15 in 1914, 19 in 1913 and 12 in 1912; and cancer, 6 in 1914, 5 in 1913, 6 in 1912. There were 37 suicidal deaths in 1914, 33 in 1913, and 47 in 1912; 20 homicidal in 1914, 15 in 1913, and 16 in 1912; there were 85 accidental deaths in 1914, 92 in 1913, and 72 in 1912; most of these were accidental drownings, 38 in 1914, 18 in 1913, and 24 in 1912. Of the accidental deaths, crushing caused 12. The following table will show the whole number of deaths occurring among both officers and enlisted men, the differences accounting for officers' deaths, which are not used above, in order that accurate comparison could be made with statements from last year's report.

TABLE No. 8.—*Deaths among officers and enlisted troops serving in the United States continental (excluding Alaska), year 1914.*

Causes of death.	Number.	Ratio per 1,000 of—	
		Mean strength.	Deaths from disease or external causes.
DISEASES.			
Tuberculosis	32	0.49	191.6
Pulmonary	18	.28	107.7
Miliary	6	.09	35.9
Tuberculous meningitis	4	.06	23.9
Of other organs	3	.05	17.9
Abdominal	1	.02	5.9
Pneumonia	15	.23	89.8
Organic heart disease	13	.20	77.8
Endocarditis, chronic	4	.06	23.9
Cardiac dilatation	3	.05	17.9
Valvular disease	3	.05	17.9
Myocarditis, chronic	2	.03	11.9
Aortic stenosis	1	.02	5.9
Cancer	10	.15	59.8
Appendicitis	9	.14	53.8
Measles	8	.12	47.9
Purulent infection and septicemia	6	.09	35.9
Nephritis, chronic	6	.09	35.9
Interstitial	3	.05	17.9
Parenchymatous	3	.05	17.9
Epidemic cerebrospinal meningitis	5	.08	29.9
Typhoid fever	3	.05	17.9
Syphilis, tertiary	3	.05	17.9
Alcoholism	3	.05	17.9
Acute	2	.03	11.9
Delirium tremens	1	.02	5.9
Simple meningitis	3	.05	17.9
Ulcer of the stomach	3	.05	17.9
Nephritis, acute	3	.05	17.9
Cause of death unknown	3	.05	17.9
Dysentary, entamoebic	2	.03	11.9
Encephalitis, acute	2	.03	11.9
Apoplexy	2	.03	11.9
Epilepsy	2	.03	11.9
Arterial sclerosis	2	.03	11.9
Embolism	2	.03	11.9
Acute dilatation of the stomach	2	.03	11.9
Ulcer of duodenum	2	.03	11.9
Intestinal obstruction	2	.03	11.9
Disease of the pancreas	2	.03	11.9
Mental alienation	2	.03	11.9
General paralysis of the insane	1	.02	5.9
Psychosis associated with disease of the brain	1	.02	5.9
Smallpox	1	.02	5.9
Scarlet fever	1	.02	5.9
Erysipelas	1	.02	5.9
Abscess of the brain	1	.02	5.9
Tumor of the brain	1	.02	5.9
Pericarditis	1	.02	5.9

TABLE No. 8.—*Deaths among officers and enlisted troops serving in the United States, continental (excluding Alaska), year 1914*—Continued.

Causes of death.	Number.	Ratio per 1,000 of— Mean strength.	Deaths from disease or external causes.
DISEASES—continued.			
Endocarditis, septic	1	.02	5.99
Aneurism	1	.02	5.99
Oedema of the larynx, acute	1	.02	5.99
Hyperthyroidism, subacute	1	.02	5.99
Bronchopneumonia	1	.02	5.99
Congestion of the lungs, acute	1	.02	5.99
Others of the pharynx	1	.02	5.99
Disease of the aesophagus	1	.02	5.99
Multiple hemorrhages from stomach	1	.02	5.99
Colitis, acute gangrenous	1	.02	5.99
Inguinal hernia	1	.02	5.99
Cirrhosis of the liver	1	.02	5.99
Peritonitis general	1	.02	5.99
Congestion of the kidneys	1	.02	5.99
Total for disease	167	2.56	1,000.00
EXTERNAL CAUSES.			
Suicidal	38	.58	251.66
By firearms (rifle, 12; revolver, 12)	24	.37	158.94
By poison (carbolic acid, 2; phenol, 2; potassium cyanide, 1)	5	.08	33.11
By hanging	3	.05	19.87
By asphyxia (illuminating gas)	2	.03	13.24
By drowning	2	.03	13.24
By cutting instrument (razor)	1	.02	6.62
By crushing (under railroad train)	1	.02	6.62
Homicidal	20	.31	132.45
By firearms: By comrades, 6 (quarrel, 5; unprovoked, 1); by civilians, 3 (causes unknown); (revolver, 5; rifle, 3; unknown, 1)	9	.14	59.60
By cutting instruments (all stab wounds by civilians, in quarrel, 2; unknown, 1)	3	.05	19.87
By other means: Fracture of skull, 3 (all struck on head by blunt instrument, circumstances unknown); narcotic poisoning, acute, 1 (administered in house of prostitution); contused wound of head, 1 (from blunt instrument, circumstances unknown); cerebral hemorrhage, 1 (struck by fist of another soldier during fight); cerebral concussion, 1 (struck on head with mess stool, by a general prisoner during quarrel); unknown, 1 (verdict of homicide by a coroner's jury)	8	.12	52.98
Accidental	93	1.43	615.89
By drowning (while swimming, 14; fall from boat, docks, etc., 7; circumstances unknown, 7; capsizing of boats, 6; while fording river on march, 2; fall into surface tanks, 2; while swimming horse, 1; thrown by horse into water, 1)	40	.61	264.90
By crushing (by moving trains, 4; by fall from high places, 3; struck by automobiles, 3; struck by street cars, 2; by "landslide," 1; thrown from "bobsled" against telephone pole, 1)	14	.21	92.72
By gunshot wounds: Self inflicted, 5; by ricocheted bullets, 2; by comrades, 2 (while hunting, 1; while at gallery practice, 1); unloading Mexican shell, 1; stray shot during battle between Mexicans, 1; unknown, 1	12	.18	79.47
By poison (methyl alcohol, 5; ether anesthesia, 1; opium, 1)	7	.11	46.36
By falls (from high places, 7; from horse, 2)	9	.14	59.60
Injured by animals (kicked by horse, 1; thrown from horse, 1)	2	.03	13.24
Ptomaine poisoning	1	.02	6.62
Asphyxiation from illuminating gas	1	.02	6.62
Lightning stroke	1	.02	6.62
Exposure to cold	1	.02	6.62
Heat exhaustion	1	.02	6.62
By diving into shallow water	1	.02	6.62
Exhaustion after exposure in water	1	.02	6.62
Compression of brain, injuries received while intoxicated	1	.02	6.62
Circumstances unknown, found dead	1	.02	6.62
Total for external causes	151	2.31	474.84
Total for disease	167	2.56	525.16
Grand total	318	4.87	1,000.00

PREVALENCE OF SPECIAL DISEASES.

TYPHOID FEVER.

Seven cases of typhoid fever (officers and enlisted men) occurred during the year in the Army stationed within the geographical limits of the United States. Four of these cases were in recently enlisted recruits who were in the prodromal stage of the disease. The history of several of these cases illustrate the failure to take early advantage of laboratory procedures in diagnosing obscure cases of continued fever. Of the other cases two were Hospital Corps soldiers, one of whom had received, according to the records, three doses of typhoid vaccine 15 months previously; the other had received two such doses 26 months prior to the attack. The seventh case was a sergeant in the Coast Artillery Corps who had volunteered for vaccination in 1910 but who had not been revaccinated in June, 1912, when he reenlisted; his attack occurred 49 months after vaccination and following a trip of two weeks away from the post. No other cases occurred among American or native troops at home or abroad. Three deaths occurred. One of the patients dying had received no vaccine, the other two each received one dose three and one days prior to going on sick report, respectively. It is believed the taking of the temperature prior to giving the first dose of vaccine would detect this class of cases. All cases receiving the complete course of vaccine recovered.

From the reports of contagious diseases it is observed that typhoid is present at posts occasionally among civilian residents who have not been vaccinated against it.

TABLE NO. 9.—*Cases of typhoid in the Army, 1914.*

No	Rank.	Date enlisted.	Date taken sick.	Date vaccinated.			Original diagnosis.	Laboratory findings.	Previous vaccination or typhoid.	Result of disease.	Age	Station.	Remarks.
				First dose.	Second dose.	Third dose.							
1	Recruit, Twenty-third Company.	Feb. 19, 1914	Feb. 25, 1914	Feb. 23, 1914	None.....	None.....	Undetermined, vaccinia.	None.....	V, no; T,?	Died Mar. 10, 1914.	23	Jefferson Barracks, Mo.	Typhoid ulcer last 12 inches of ileum; hemorrhage.
2	Private, Hospital Corps.	Nov. 13, 1912	Mar. 23, 1914	Nov. 13, 1912	Nov. 23, 1912	Dec. 2, 1912	Fever simple, continued typhoid Apr. 11.	Feces, positive for typhoid Apr. 4; agglutination, 1-100.	V, no; T, no.	Duty May 10, 1914.	24	Fort Niagara, N. Y.	
3	.....do.....	Mar. 21, 1912	June 24, 1914	Mar. 21, 1912	Apr. 1, 1912	Not given...	Fever undetermined.	Blood positive, June 26 and July 1, 1914.	V, no; T,?	Duty July 24, 1914.	23	Madison Barracks, N. Y.	Soldier states sick 1 week after second dose; does not recall taking third dose.
4	Recruit, Thirteenth Company.	June 30, 1914	July 4, 1914	None.....	None.....	None.....	Appendicitis; operation, July 14, 1914.	None.....	V, no; T,?	Died July 16, 1914.	21	Columbus Barracks, Ohio.	Autopsy disclosed perforation, peritonitis.
5	Recruit, Coast Artillery Corps.	Aug. 27, 1914	Sept. 11, 1914	Aug. 27, 1914	Sept. 8, 1914	Not given...	Typhoid.....	Blood positive for typhoid, Sept. 14 (3 days).	V, no; T,?	Duty Nov. 18, 1914.	21	Fort Slocum, N. Y.	
6	Recruit, Twelfth Infantry (recruit detachment).	Nov. 21, 1914	Nov. 22, 1914	Nov. 21, 1914	None.....	None.....	Bronchitis, acute, catarrhal.	Agglutination, 1-5,000.	V, no; T,?	Died Dec. 22, 1914.	26	Columbus Barracks, Ohio.	Colon alone involved.
7	Sergeant, One hundred and sixteenth Company, Coast Artillery Corps.	June, 1909 / June[1] 1912	Dec. 1, 1914	Sept. —, 1910	(2)	(2)	Paratyphoid.	Agglutination, 1-400.	V, no; T,?	Duty Apr. 10, 1915.	26	Fort Screven, Ga.	At Atlanta, Ga., 10 days previous to illness; no typhoid at post.

[1] Through error was not revaccinated on second enlistment in 1912.
[2] Volunteered; dates unknown.

NOTE.—Under "Previous vaccination or typhoid," V = vaccination, T = typhoid. When followed by (?) it indicates that it is unknown whether patient has had a previous attack of typhoid fever or not.

TABLE NO. 10.—*Cases of paratyphoid in the Army, 1914.*

No.	Rank.	Organization.	Date taken sick.	On duty at—	Where sick.	Laboratory examination.	Vaccinated against typhoid.	Result of disease.	Age.	Service.
1	Sergeant	Thirty-second Company, Philippine Scouts.	July 11, 1914	Manila, P. I.	Department Hospital, Manila.	Positive	No	Duty Aug. 16	27	6 years, 7 months.
2	Private	Forty-ninth Company Philippine Scouts.	Mar. 15, 1914	do	do	do		Duty June 2	24	3 years.
3	do	First Infantry	June 27, 1914	Schofield Barracks.	Schofield Barracks.	do	Jan. 23, 1914	Duty Aug. 19	21	5 months.
4	do	Troop D, Thirteenth Cavalry	Sept. 15, 1914	Columbus, N. Mex.	Fort Bliss, Tex.	do	In 1911 and Apr. 18, 1914.	Duty Nov. 16	30	6 years 6 months.

Table No. 10 shows four cases of paratyphoid fever reported and confirmed by bacteriological diagnoses in the entire Army. There were seven other cases reported and diagnosed clinically as paratyphoid fever which, however, were not confirmed by laboratory procedures. Seven of these cases were reported from Texas, six of them from Fort Bliss, though the patients had been transferred there from different stations. The seventh case originated at Galveston and was cared for at field hospital No. 3 in the Second Division. Complete histories, including the records of the laboratory examinations in these seven cases, were not received at this office until late in 1914; too late to separate them from paratyphoid, with which they had already been classed in the statistical tables. Therefore in these tables there are shown 11 cases of paratyphoid fever. Of the cases confirmed as positive by laboratory methods, it will be noted that two of them were in the Philippines, one in Hawaii, and one in the United States. Careful laboratory examinations exclude any of these cases from being typhoid.

In this connection it is to be noted that the cases of simple and continued fever are decreasing in number, indicating a greater skill and accuracy in diagnosis.

It is quite interesting to note that among all the troops scattered along the Mexican border and in the large camps in Texas that not a single case of typhoid fever has occurred in an inoculated man since June 4, 1912. The following tabulation is for the purpose of comparing the figures for 1914 with those for 1912 and 1913:

Typhoid fever, the Army, officers and enlisted men, American and native troops.

Year.	Cases.		Deaths.		Immunized persons.	
	Number.	Rates for 1,000 mean strength.	Number.	Rates for 1,000 mean strength.	Cases.	Deaths.
1914	7	0.07	3	0.03	1	None.
1913	4	.04			2	None.
1912	27	.31	4	.04	8	None.

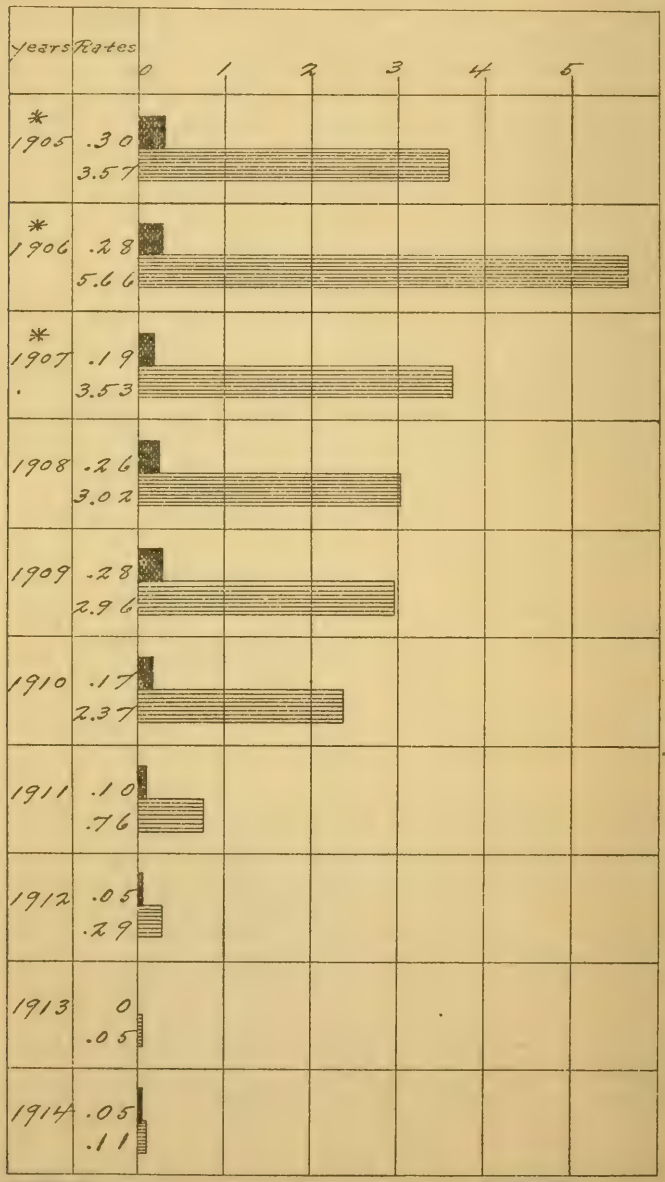
Attention is invited to chart P, showing the admission and death rates for officers and enlisted men serving in the United States. This chart shows graphically the remarkable decrease in both rates as the result of the use of the typhoid prophylactic. This immunization was begun, but was voluntary, in 1909, and was made compulsory for the entire Army in 1911. (See annual report of this office for 1912, pp. 52 et seq., for the various steps from voluntary to compulsory prophylaxis.)

Reimmunizations with the typhoid prophylactic are now carried out upon reenlistment in the same way as revaccination against smallpox. Officers are required to be revaccinated five years after the first course. After two completed courses of vaccination are given no further is required.

The increasing use of vaccination against typhoid by the National Guard is to be encouraged. This procedure is now necessary before these troops can be mobilized as United States volunteers and to have

Chart P.

Typhoid Fever.
Admission and Death Rates.
Admission and Death rates for Typhoid Fever, United States {Officers and enlisted men} Years, 1905–1914.

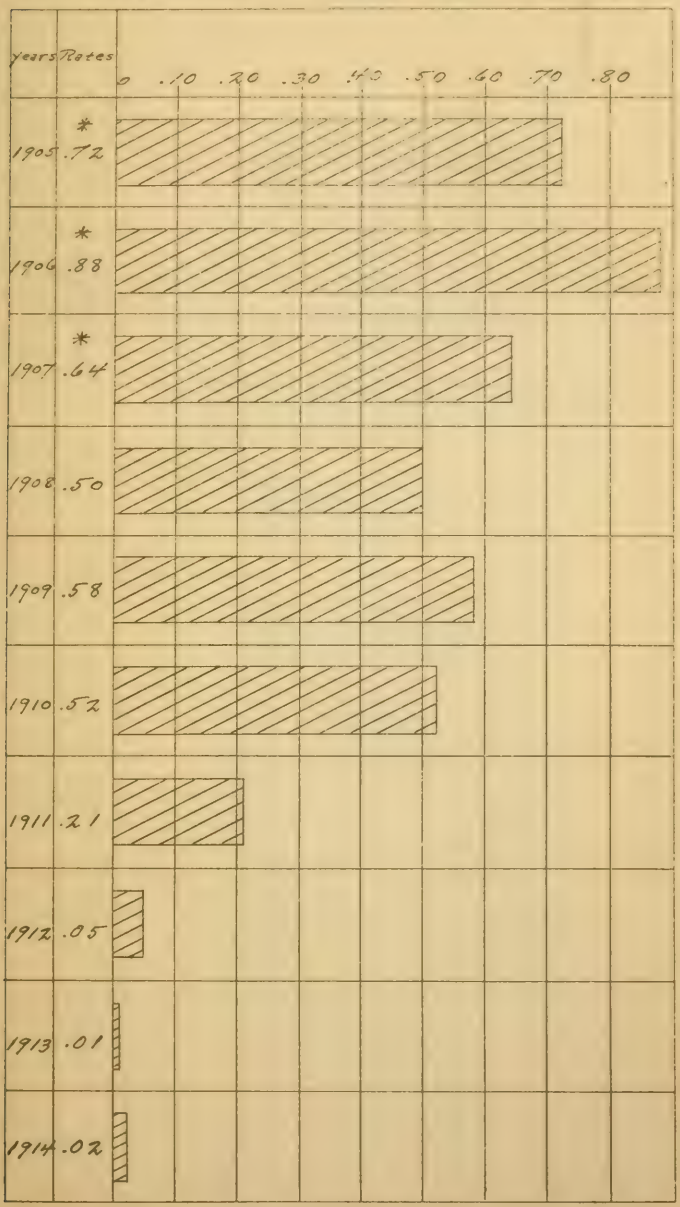


* Enlisted men. Officers not included.

Chart P[4]

Typhoid Fever.
Noneffective Rates.

Noneffective rates for Typhoid Fever, United States {Officers and enlisted men} years, 1905–1914.



* Enlisted men. Officers not included.

Chart Q.

Typhoid Fever.

Admission Rates.

Admission rates for Typhoid Fever, for the Army {Officers, and American and Native enlisted men} years, 1905–1914.

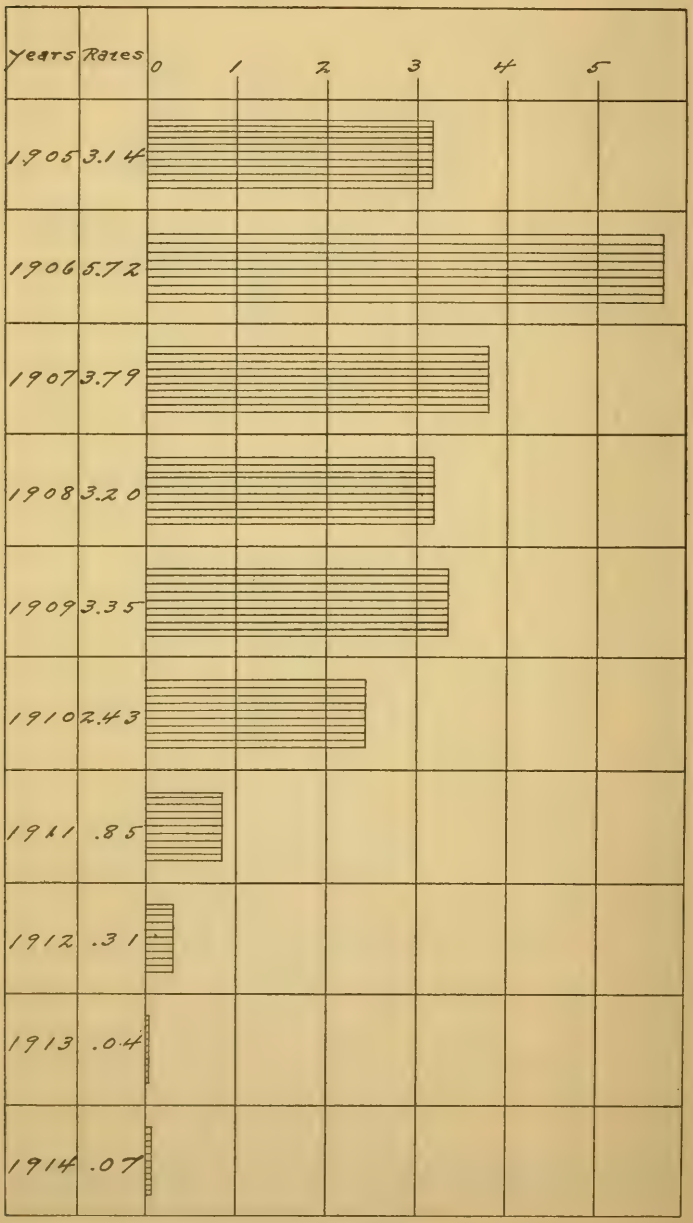
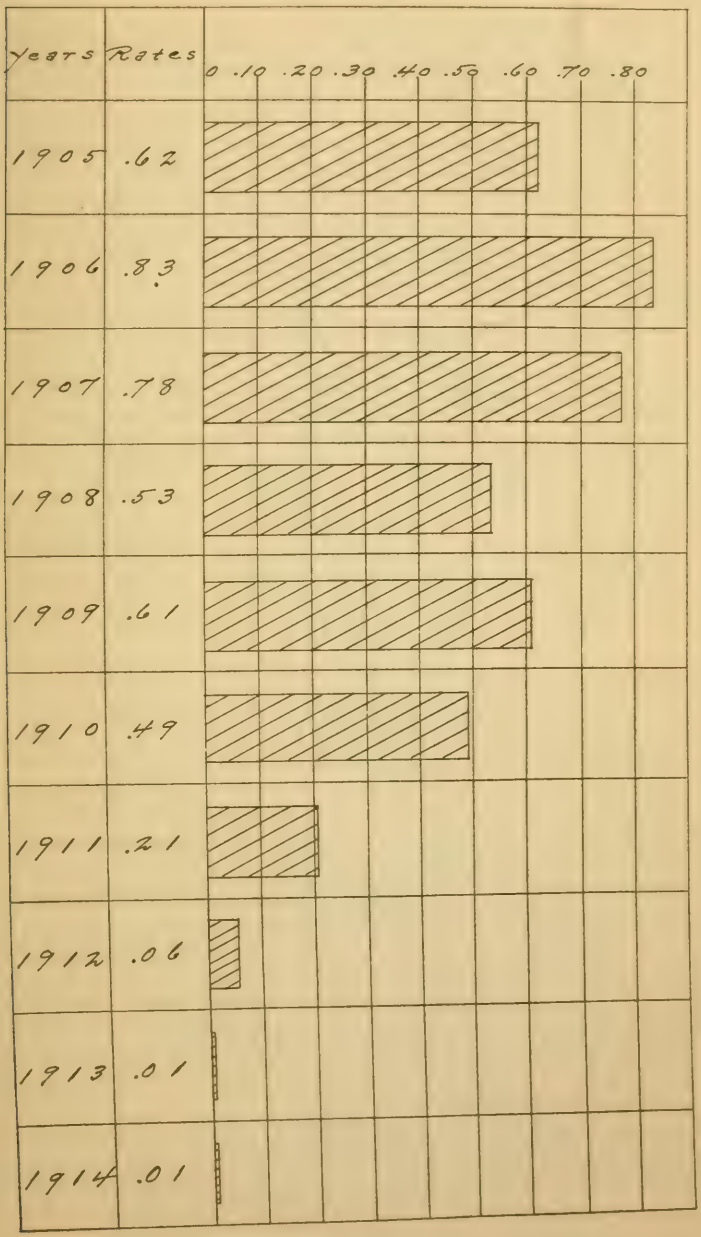


Chart Q[1]

Typhoid Fever.
Noneffective Rates.

Noneffective rates for Typhoid Fever for The Army { Officers, 2d American and Native enlisted men } years, 1905–1914.



this already accomplished is to materially expedite mobilization. I is desirable in order to obtain standardized results that the vaccin used by troops liable to service under the Federal Government b that made for the Regular Army and supplied by the laboratory Army Medical School, Washington, D. C.

VENEREAL DISEASES.

Special measures for protection from these diseases were begu five years ago. The admission rate for enlisted men in the Unite States is higher than for 1913, being 89.84 compared with 85.83 While disappointing the increased rate may be accounted for in part by the fact that the troops from a number of garrisons having been mobilized and placed on the southern border in addition to the Second Division, has increased the proportion of troops on duty under these circumstances. But such facts only serve to palliate but not excuse the failure to lower the ratio of these preventable diseases. After the encouraging decrease from a rate of 115.74 in 1912 to 85.83 in 1913, which attested the efficiency of the measures in use a further reduction for 1914 could have been expected. However, whatever excuses may be advanced in the way of interruption of the usual habits of troops by the duty on the border and increase in number of recruits, it is after all a failure to carry out the existing orders relative to this matter. The soldier should be as well disciplined in the field as in the garrison and certainly a low noneffective rate is of even greater importance in the former than in the latter.

Letters were written by The Adjutant General to the department commanders asking for a report from posts in the United States that showed for the first six months a rate higher than the average for the United States for 1913, and those posts which, though below the average, showed a markedly increasing rate over the one of the previous year.

The reports from these posts were unanimous in only one feature—that the time elapsed between exposure and the application of prophylaxis was excessive in a percentage of cases. To meet this it was recommended that men be encouraged to carry prophylaxis tubes when leaving posts where there were no facilities permitting early returns. While the remoteness of posts from the places visited by soldiers on pass may account for a number of cases by preventing sufficiently early resort to prophylaxis, it is believed by far the greater number of cases are the result of neglect to use prophylaxis in compliance with the general order relative thereto.

The post exchanges in many posts carried a satisfactory prophylactic packet on sale at cost. Reports indicate that there is practically no sale for them. The chief surgeon of one department recommended therefore the gratuitous issue of these packets, and at certain posts where the early use of prophylaxis is not possible this has been done, but it in nowise excuses the individual from a compliance with the orders relative to prophylaxis.

The matter appears to be principally a question of discipline, and it may be now stated that venereal disease in a command is an index of the discipline of that command. The study of the venereal problem

along its present lines has gone far enough to permit the considering of the adoption of measures generally applicable to the service in management and control of that problem.

The local arrangements differ at stations and probably must so differ due to varying conditions. Further improvement, as shown by a generally lessening rate for venereal diseases, will result from educational measures. The idea must permeate the military body that venereal disease is avoidable, a serious menace to health, a mark of inefficiency, and a slur upon soldierly conduct. Efficient administration of present orders will through discipline effect some immediate improvement, but a marked reduction of noneffectiveness, often greater than that produced by the next three or four most prevalent diseases combined, can only be expected to follow earnest and continued educational measures resulting in a change of attitude regarding these diseases by the Army.

The commanding officer and the surgeon do not always cooperate sufficiently to obtain the best results under the present conditions. Every case is required to be reported whether doing full duty or upon sick report. The admission rate for any command therefore should not be effected by the presence of these cases upon sick report. When the soldier does not do duty because hindered by venereal disease he loses pay for such time. Some duties have had effects upon cases of venereal diseases, but often most duties can be performed without untoward results. A partial release from certain duty, which in the opinion of the surgeon might be bad in its effects upon the course of this disease, would protect the soldier as effectively as if he missed all duty, would still retain him for most instruction while he did "light duty" when carried on sick report in quarters. The holding of infected soldiers in post while in a condition dangerous to anyone should be insisted on. These measures carefully carried out have resulted in markedly and promptly lowering the rates for venereal diseases and are worthy of general application.

This matter must continue to occupy the attention and energy of officers with troops. Indeed, it would not seem necessary to emphasize a matter that causes in the United States, in time of peace, 89 admissions for every 1,000 men, nearly a company out of every regiment.

It is believed that the instruction of soldiers as to the dangers arising from venereal disease is inadequate. Heretofore, often perfunctory lectures during the year has been the extent of the educational measures. An intelligent and comprehensive series of lectures should be given at recruit depots on hygienic matters, including venereal diseases. This instruction should be aided by illustrations and moving pictures adapted to the subject. This instruction could be kept up at posts, and should include subjects of general interest in military sanitation. It is planned to recommend such a system this year when certain details can be determined.

TABLE No. 12.—*Venereal diseases, Army and United States proper, enlisted men, compared for years 1912, 1913, and 1914.*

	Army (enlisted men).			United States proper (enlisted men).		
	1914	1913	1912	1914	1913	1912
Original admissions (cases) per 1,000 of mean strength	110.69	97.22	136.70	89.84	85.83	115.7
Constantly noneffective rate	4.73	4.51	7.78	3.75	3.58	5.9

TABLE No. 13.—*Venereal diseases, admissions and discharges, Army American troops (enlisted men), year 1914.*

	Mean strength.	Syphilis.				Chancroid.			
		Admissions.		Discharges.		Admissions.		Discharges.	
		Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
United States	61,362	1,137	18.53	34	0.55	1,225	19.96		
Alaska	915	4	4.37			2	2.19		
Philippines	10,253	487	47.49	5	.47	565	55.10		
Hawaii	7,971	149	18.69	4	.50	64	8.03		
Panama	2,010	36	17.91			90	44.78		
Vera Cruz, Mexico	2,266	83	36.63			433	191.09		
China	1,047	103	98.38			149	142.31		
Army transports	1,404	8	5.70			44	31.34		
Total	87,228	2,007	23.01	43	.49	2,572	29.49		

	Gonorrhea.				Total.			
	Admissions.		Discharges.		Admissions.		Discharges.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
United States	3,151	51.35	20	0.32	5,513	89.84	54	0.87
Alaska	14	15.30			20	21.86		
Philippines	851	83.00	3	.28	1,903	185.60	8	.76
Hawaii	324	40.65	1	.13	537	67.37	5	.63
Panama	147	73.13			273	135.82		
Vera Cruz, Mexico	339	149.60			855	377.32		
China	163	155.68			415	396.37		
Army transports	87	61.96			139	99.00		
Total	5,076	58.20	24	.27	9,655	110.69	67	.76

	Total days.	Constantly sick.	Ratio per 1,000.
Syphilis	43,197	118.35	1.36
Chancroid	36,024	98.70	1.13
Gonorrhea	71,347	195.47	2.24
Total	150,568	412.51	4.73

TABLE No. 14.—*Venereal diseases, by years, 1910 to 1914, United States, continental (excluding Alaska), enlisted men.*

[Ratio per 1,000 of mean strength.]

	Number of cases after deducting recurrent admissions.	Admitted.			Discharged on certificate of disability.			Died.			Noneffective.		
		Total.	White.	Colored.	Total.	White.	Colored.	Total.	White.	Colored.	Total.	White.	Colored.
Gonorrhea and results:													
1914	51.35	51.35	52.04	28.99	0.32	0.33	.....	.....	.....	.....	1.80	1.81	1.44
1913	49.46	49.46	49.14	60.14	.66	.68	.....	.....	.....	.....	1.84	1.84	1.65
1912	70.07	70.07	69.87	74.36	.60	.61	0.40	0.02	0.02	.....	3.26	3.27	2.94
1911	85.37	94.52	94.48	95.12	.79	.84	.....	.....	.....	.....	4.68	4.72	3.93
1910	91.22	102.44	102.17	107.17	.77	.78	.67	.....	.....	.....	5.90	5.98	4.41
Chancroid:													
1914	19.96	19.97	20.09	18.56	.....	.....	.....	.....	.....	.....	.80	.79	1.18
1913	15.38	15.38	15.11	24.76	.....	.....	.....	.....	.....	.....	.57	.56	.98
1912	20.09	20.09	20.52	10.45	.03	.03	.....	.....	.....	.....	1.01	1.03	.50
1911	23.55	25.04	25.22	21.82	.....	.....	.....	.....	.....	.....	1.32	1.34	1.05
1910	24.23	26.42	25.83	36.84	.....	.....	.....	.....	.....	.....	1.53	1.51	1.86
Syphilis:													
1914	18.53	18.53	18.83	7.66	.55	.43	4.38	.05	.05	.....	1.15	1.11	2.46
1913	20.99	20.99	20.98	21.23	.35	.29	2.36	.07	.05	0.59	1.17	1.15	1.90
1912	25.58	25.58	25.84	19.69	.62	.61	.80	.03	.03	.....	1.70	1.68	2.11
1911	36.37	44.30	45.33	25.91	.52	.48	1.36	.11	.11	.....	2.82	2.85	2.30
1910	22.54	26.65	26.68	26.12	1.13	1.15	.67	.04	.04	.....	2.71	2.75	2.07
Total venereal:													
1914	89.84	89.84	90.99	52.52	.87	.77	4.38	.05	.05	.....	3.75	3.70	5.08
1913	85.83	85.83	85.23	106.13	1.01	.97	2.36	.07	.05	.59	3.58	3.55	4.53
1912	115.74	115.74	116.24	104.50	1.26	1.26	1.21	.05	.05	.....	5.96	5.98	5.55
1911	145.29	163.85	165.03	142.85	1.31	1.31	1.36	.11	.11	.....	8.82	8.91	7.29
1910	137.98	155.51	154.69	170.13	1.90	1.94	1.34	.04	.04	.....	10.14	10.25	8.34

TABLE No. 15.—*Syphilis, United States (continental), excluding Alaska, years 1910 to 1914, enlisted men.*

[Ratio per 1,000 of mean strength.]

Year.	Primary syphilis.			Secondary syphilis.			Tertiary syphilis.			Hereditary syphilis.			Total.		
	Case rates.	Admission rates.	Noneffective rates.	Case rates.	Admission rates.	Noneffective rates.	Case rates.	Admission rates.	Noneffective rates.	Case rates.	Admission rates.	Noneffective rates.	Case rates.	Admission rates.	Noneffective rates.
1914	3.10	3.10	0.17	12.73	12.73	0.63	2.25	2.25	0.32	0.05	0.05	0.02	18.53	18.53	1.15
1913	2.72	2.72	.13	15.45	15.45	.73	1.90	1.90	.27	.02	.02	.01	20.99	20.99	1.17
1912	3.89	3.89	.18	19.01	19.01	1.20	2.50	2.50	.31	.17	.17	.01	25.58	25.58	1.70
1911	3.75	4.09	.26	28.66	35.54	2.14	3.64	4.29	.43	.33	.38	.02	36.37	44.30	2.82
1910	3.34	3.24	.23	17.26	19.96	2.00	1.83	2.01	.36	.11	.12	.01	22.54	26.65	2.71

It will be seen from these tables that the rate for venereal diseases (cases) for the United States, continental, was 89.84 per 1,000 for 1914, as compared with 85.83 per 1,000 for 1913. There were 114 cases of syphilis less than last year. For gonorrhea, the number of cases is 203 more than last year, and in the local infection, chancroid, the increase is 308. In 1912 there was a large falling off in the number of secondary and tertiary cases of syphilis with a slight increase in the case rate for the primary cases. In comparing the

figures for 1912 and 1913, and especially 1913, with the preceding year, it must be borne in mind that the diagnosis prior to 1911 was made without the advantage of the Wassermann reaction. These figures therefore, include latent cases which are now detected by it and which were largely missed prior to 1911.

For 1914 some increase is observed, as shown by Table No. 15, in the ratio for cases of primary and tertiary and hereditary syphilis; the ratio for secondary cases is lower.

The noneffective rate for the United States for 1914 is 3.75 as compared with 3.58 for 1913, 5.96 for 1912, 8.82 in 1911, and 10.14 for 1910. This rate is the true measure of noneffectiveness produced, and while that for 1914 is slightly higher than for 1913 it shows a marked improvement over the years preceding it.

By reference to Tables Nos. 12 and 13, it will be seen that the rates for total American troops of the Army also were slightly higher than for last year. The admission rate in 1914 was 110.69, 1913 was 97.22, and 1912, 136.70; while the noneffective rate was 4.73 in 1914, 4.51 in 1913, and 7.78 per 1,000 in 1912. The rates in the Philippine Islands were also higher, like the corresponding ones in the United States. The admission rate in the Philippine Islands was 185.60 in 1914, 149.45 in 1913, and 249.17 in 1912. The noneffective rate in the Philippine Islands for 1914 was 10.41; it was 8.92 in 1913 and 16.55 in 1912.

There were no colored troops in the Philippine Islands in 1910 and 1911; therefore the rates for these years are for white troops. The rate for white troops in 1914 was 174.79 and in 1913 was 140.77 per 1,000 for admissions and 10.05 and 8.06, respectively, for noneffectiveness, while those for the colored troops were 233.76 and 194.37 per 1,000, respectively, for admissions, with noneffective rates of 12.02 and 13.36. The rates for both white and colored troops were greater than for the previous year, excepting a slight reduction in the colored noneffective. The rates are still exceedingly high.

TABLE No. 16.—*Recruit depots—Total number of admissions, venereal diseases, with ratios and mean strength, officers and enlisted men, years 1914, 1913, and 1912.*

Recruit depots.	Year 1914.			Year 1913.			Year 1912.		
	Admissions.		Mean strength.	Admissions.		Mean strength.	Admissions.		Mean strength
	Total.	Ratio.		Total.	Ratio.		Total.	Ratio.	
Jefferson Barracks, Mo.	202	135.48	1,491	170	153.15	1,110	165	134.80	1,224
Columbus Barracks, Ohio.	194	128.39	1,511	188	158.51	1,186	167	139.75	1,195
Fort Slocum, N. Y.	129	88.30	1,461	114	104.78	1,088	196	151.12	1,297
Fort McDowell, Cal.	97	94.36	1,028	58	74.45	779	78	115.21	677
Fort Logan, Colo.	76	116.92	650	77	131.85	584	149	230.65	646
Total.	698	113.66	6,141	607	127.87	4,747	755	149.83	5,039

TABLE No. 17. *Venereal diseases—officers and enlisted men, admissions and ratios per 1,000, for posts of more than 300 men, in the United States (excluding Alaska), 1913 and 1914.*

		Year 1914.			Year 1913.		
		Mean strength.	Admissions.		Admissions.		Relative standing on list.
			Total.	Ratio.	Total.	Ratio.	
1	Fort Oglethorpe, Ga.	441	117	265.31	165	234.04	1
2	Fort Bliss, Tex.	672	129	191.96	63	88.48	21
3	Fort Sam Houston, Tex.	1,096	179	163.32	161	129.21	6
4	Fort Sill, Okla.	1,013	121	119.45	56	57.79	38
5	Fort George Wright, Wash.	380	45	118.42	73	135.44	5
6	Fort McIntosh, Tex.	434	51	117.51	42	110.24	12
7	Fort McKinley, Me.	627	72	114.83	86	119.94	9
8	Washington Barracks, D. C.	725	83	114.48	57	84.70	24
9	Fort Screven, Ga.	503	55	109.34	41	85.77	23
10	Fort Leavenworth, Kans.	653	70	107.20	70	69.38	27
11	Fort Myer, Va.	702	75	106.84	45	77.32	25
12	Presidio of San Francisco, Cal.	1,249	123	98.48	165	88.66	20
13	Fort Sheridan, Ill.	333	32	96.10	27	61.65	35
14	Fort Greble, R. I.	316	30	94.94	20	66.45	32
15	Fort Lawton, Wash.	439	41	93.39	16	40.51	44
16	Fort Ethan Allen, Vt.	932	83	89.06	118	181.54	2
17	Fort Moultrie, S. C.	469	41	87.42	49	105.38	13
	United States (officers and enlisted men)	64,357	5,524	85.84	5,128	81.75	
18	Plattsburg Barracks, N. Y.	780	65	83.33	52	66.70	31
19	Fort Andrews, Mass.	443	35	79.01	28	69.14	28
20	Fort Totten, N. Y.	723	56	77.46	73	94.93	17
21	Fort Monroe, Va.	1,132	87	76.86	126	113.41	11
22	Fort Jay, N. Y.	421	32	76.01	19	42.32	43
23	Fort Howard, Md.	465	33	70.97	28	62.50	33
24	Fort Barrancas, Fla.	616	39	63.31	50	92.08	18
25	Presidio of Monterey, Cal.	768	48	62.50	55	48.68	41
26	Madison Barracks, N. Y.	601	36	59.90	34	52.23	40
27	Fort H. G. Wright, N. Y.	668	40	59.88	36	53.18	39
28	Fort Strong, Mass.	460	27	58.70	38	99.48	15
29	Vancouver Barracks, Wash.	1,023	56	54.74	87	67.23	30
30	Fort Williams, Me.	531	27	50.85	50	86.66	22
31	Fort Riley, Kans.	656	32	48.78	81	61.51	36
32	Fort DuPont, Del.	365	17	46.58	49	95.33	16
33	Fort Caswell, N. C.	329	14	42.55	7	22.01	48
34	Fort Huachuca, Ariz.	479	20	41.75	56	102.38	14
35	Fort Terry, N. Y.	671	28	41.73	38	62.19	34
36	Fort Worden, Wash.	644	24	37.27			
37	Fort Hancock, N. J.	771	28	36.32	50	69.06	29
38	Fort Hamilton, N. Y.	610	22	36.07	32	58.39	37
39	Fort Adams, R. I.	581	18	30.98	13	23.72	47
40	Fort Yellowstone, Wyo.	330	9	27.27	2	4.88	51
41	Fort Stevens, Oreg.	351	9	25.64			
42	Fort Winfield Scott, Cal.	956	22	23.01	37	39.70	45
43	Fort Casey, Wash.	310	7	22.58			
44	West Point, N. Y.	827	15	18.14	41	50.12	41

TABLE No. 18.—*Venereal diseases—Army officers and enlisted men, by departments and divisions, year 1914.*

	Mean strength.			Cases.			Rates per 1,000 of mean strength.		
	Officers.	Enlisted men.	Total.	Officers.	Enlisted men.	Total.	Officers.	Enlisted men.	Total.
Army -American troops	4,361	87,228	91,589	29	9,991	10,020	6.65	107.53	109.40
United States (continental), excluding Alaska	2,995	61,362	64,357	11	5,513	5,524	3.67	89.84	85.84
Eastern Department	936	18,936	19,872	2	1,504	1,506	2.14	79.43	75.78
Central Department	261	3,457	3,718	1	249	250	3.83	72.03	67.24
Southern Department (excluding Cavalry division)	201	4,298	4,499	2	564	566	9.95	131.22	125.81
Cavalry division, Mexican border	369	8,404	8,773	1	626	627	2.71	74.49	71.47
Second tactical division	475	9,540	10,015	3	1,231	1,234	6.32	129.04	123.21
Western Department	499	8,481	8,890	1	507	508	2.45	59.78	57.14
Independent stations	192	1,704	1,896	.....	62	62	.....	36.38	32.70
Recruit depots	113	6,028	6,141	.....	698	698	.....	115.79	113.66
General hospitals	39	514	553	1	72	73	25.64	140.08	132.01
Alaska	43	915	958	.....	20	20	.....	21.86	20.88
Panama Canal Zone	66	2,010	2,076	.....	273	273	.....	135.82	131.50
Hawaiian Department	297	7,971	8,268	1	537	538	3.37	67.37	65.07
China	44	1,047	1,091	1	415	416	22.73	396.37	381.30
Philippine Islands (American troops)	670	10,253	10,923	7	1,903	1,910	10.45	185.60	174.86
Vera Cruz, Mexico (expeditionary force)	136	2,266	2,402	9	855	864	66.18	377.32	359.70
Army transports	72	1,404	1,476	.....	139	139	.....	99.00	94.17
Philippine Scouts	.....	5,020	.....	.....	289	.....	.....	57.57	.....
Porto Rican Regiment	38	669	707	.....	47	47	.....	70.25	66.48

Table No. 16 shows the rates of admission for three years of venereal disease at the five recruiting depots. Creditable decreases in the ratios for admissions appear at all depots except Fort McDowell which is 20 points higher than for 1913, when it had by far the lowest rate. Fort Slocum has the lowest rate for 1914, and is only slightly higher than that for the United States; Columbus Barracks made the greatest decrease in the rate, changing places since 1913 with Jefferson Barracks which has the highest rate of any of the depots.

Table No. 17 gives the relative standing and rates with reference to venereal disease for 44 posts in the United States. The standing of the post is also shown in this table for the preceding year. The post standing first and having the greatest rate for venereal disease is Fort Oglethorpe, Ga., with the extremely high rate of 265.31. This post was also No. 1 last year with the high rate of 234. There appears no reason why this post should have the unenviable distinction of having such rates for the past two years. It is 74 points above the next post and 180 above the average rate for the United States.

There appears to be no defense for the existence of such high admission rates for venereal disease at posts in the United States. In fact it would appear that a rate of over 100, which is 15 points above the average rate for posts in the United States, would indicate that War Department orders were not being carried out. The presence of larger numbers of troops along the Mexican border has altered the normal conditions for not only posts in that part of the country, but at the posts from which the troops were withdrawn and, therefore, the comparison of rates at different posts is less reliable than usual.

The most marked improvement is shown at Fort Ethan Allen, which stands No. 16 this year, having been No. 2 in 1913; Fort Du

Pont, Del., dropped from No. 16 in 1913 to No. 32 in 1914; Fort Strong, Mass., from No. 15 in 1913 to No. 28 in 1914.

The department surgeon of the Eastern Department, in his annual report for 1913, makes the following statement with reference to the problem of venereal disease in the Army:

> While venereal diseases have been materially decreased under the provisions of General Orders 17, War Department, 1912, since they went into force, it is believed that a further decrease can be secured by the use of the prophylactic tubes in addition to the dispensary treatment. There is no proof that the dispensary method is effective if used six hours or more after contact, which interval occurs frequently with men unable to return from pass or absence in a less period on account of transportation facilities or distance of neighboring towns from such posts. These tubes, to be used by the men immediately after contact, should be obtained by the organization commander and issued gratuitously in such cases. Experience has proven that men will not purchase tubes from post exchanges to any great extent.

MALARIAL FEVERS.

The admission rate for malarial fever in the United States is 10.79, which is higher than for 1913 but lower than for any other previous year. The admission rate for 1913 was 8.79, as compared with 14.22 for 1912, 14.68 for 1911, 16.36 for 1910, and 23.06 for 1909. The noneffective rate is 0.24, and was 0.18 per 1,000 in 1913 as compared with 0.30 in 1912, 0.35 in 1911, 0.36 in 1910, and 0.51 in 1909. No discharges or deaths resulted. Chart R, shows comparative rates for this disease for the entire command, including, officers.

Table No. 19 shows the relative incidence of the various forms of malarial infection for the past five years for officers and enlisted men.

TABLE NO. 19.—*Malarial infections, United States, continental (excluding Alaska), years 1910 to 1914, inclusive, officers and enlisted men.*

[Ratio per 1,000 of mean strength.]

Malarial fevers.	Admitted.					Noneffective.					Discharges.	Deaths.
	Total United States.	Officers.	Enlisted men.			Total United States.	Officers.	Enlisted men.				
			Total.	White.	Colored.			Total.	White.	Colored.		
Quartan and tertian:												
1914	9.28	5.68	9.45	9.67	2.19	0.18	0.16	0.18	0.18	0.09	.....	.....
1913	7.16	4.17	7.31	7.50	1.18	.14	.14	.13	.14	.01	.....	.....
1912	12.20	7.92	12.42	12.80	2.01	.24	.12	.24	.25	.04	.....	.....
1911	13.26	6.25	13.63	14.36	.68	.28	.08	.29	.30	.01	.....	.....
1910	14.16	6.68	14.57	15.18	3.68	.27	.15	.28	.29	.06	.....	.....
Estivo-autumnal:												
1914	.71	2.00	.65	.67	.....	.03	.....	.02	.02	.....	.....	.....
1913	.69	.96	.67	.69	.....	.02	.02	.13	.14	.01	.....	.....
1912	.94	.66	.96	1.00	.....	.03	.02	.24	.25	.04	.....	.....
1911	.88	.69	.89	.94	.....	.04	.05	.29	.30	.01	.....	.....
1910	1.45	3.00	1.36	1.39	1.00	.05	.06	.28	.29	.06	.....	.....
Malarial cachexia and undetermined malarial fevers:												
1914	.75	2.00	.69	.71	.....	.03	.....	.04	.04	.....	.....	.....
1913	.78	.32	.81	.64	6.49	.03	.00	.02	.02	.11	0.02	.....
1912	.85	.99	.84	.77	2.41	.03	.03	.02	.02	.02	.....	.....
1911	.21	1.04	.16	.17	.....	.02	.11	.02	.02	.....	.....	.....
1910	.46	1.00	.43	.46	.....	.03	.05	.03	.03	.....	.....	.....
Total malarial diseases:												
1914	10.74	9.68	10.79	11.05	2.19	.24	.37	.24	.24	.08	.....	.....
1913	8.62	5.45	8.79	8.82	7.67	.18	.16	.18	.18	.12	.02	.....
1912	13.99	9.57	14.22	14.65	4.42	.29	.17	.30	.31	.06	.....	.....
1911	14.35	7.99	14.68	15.47	.68	.34	.24	.35	.36	.01	.....	.....
1910	16.07	10.68	16.36	17.02	4.69	.35	.26	.36	.37	.09	.....	.....

TABLE NO. 20.—*The 10 posts of more than 200 (officers and enlisted men) in the United States, continental (excluding Alaska) having the highest admission rates for malarial diseases, year 1914, compared with 1913.*

[Ratio per 1,000 of mean strength.]

Posts.	Mean strength.		Malarial diseases, total ratio.	
	1914	1913	1914	1913
Washington Barracks, D. C	725	673	73.10	41.60
Fort Myer, Va	702	582	28.49	12.03
Leavenworth Kans. (military prison)	258	201	27.13	14.93
Fort Sam Houston, Tex	1,096	1,246	24.64	3.21
Fort Sheridan, Ill	333	438	24 02	
Jefferson Barracks, Mo	1,491	1,110	22.13	34.23
Fort Caswell, N. C	329	318	21 28	44.03
Fort Logan, Colo	650	584	20 00	6.85
Fort Washington, Md	272	393	14.71	35.62
Fort Screven, Ga	503	478	13.92	12.55

It is satisfactory to note that Fort Washington, Md., has an admission rate of only 14.71 as compared with 35.62 for 1913. When it is recalled that this post had the excessive rate of 736 as recently as 1906 and that for the years 1906 to 1911 the rate was only once below 200, the result of intelligent and persistent work to reduce malarial disease is apparent. Following the effective work done by Lieut. T. C. Jackson, Medical Reserve Corps, who went to Fort Washington in November, 1911, and the faithful endeavor of surgeons there subsequent to that time, with the cooperation of the local authorities and the Quartermaster Department, the rate has rapidly fallen. This campaign against malarial disease is evidence of the practicality of the accepted antimalarial measures and a demonstration of the rapid improvements that follow their adoption. Two posts, practically, in the city of Washington, have the unenviable and apparently unnecessary distinction of being Nos. 1 and 2 on the list of 10 posts having the highest admission rate for malaria, viz, Washington Barracks with 73.10 and Fort Myer 28.49. Only 5 of the 10 posts in the table for 1913 are found in it this year. The five posts now appearing are scattered from the Atlantic to the Rocky Mountains. These facts demonstrate the necessity of alertness in preventing the development of malaria. It is thought the use of the register of malarial cases will enable closer track to be kept of them and tend to prevent the infection of others by imported cases.

TUBERCULOSIS.

The following tabulation shows for the total American Army, and separately for the different countries where the Army has been stationed continually, the case rate for tuberculosis (all forms) for enlisted men for the last seven years. In this tabulation all readmissions during each year have been eliminated, so that the actual occurrence of tuberculosis (all) is shown:

Tuberculosis (all), enlisted men, case rates only.

Year.	United States.	Philippine Islands.	Alaska.	Hawaii.	Transports.	Panama.	China.	Vera Cruz.	Total.
1914	2.69	7.31	1.09	3.01	2.85	2.49	6.69	4.85	3.35
1913	3.07	6.70	1.75	4.24	4.37	3.76	3.29	.....	3.66
1912	3.25	5.02	4.18	2.07	2.74	.....	.....	.....	3.49
1911	3.64	3.77	2.68	1.99	1.76	.....	.....	.....	3.55
1910	3.34	5.46	1.85	4.10	.80	.....	.....	.....	3.65
1909	4.53	5.06	3.76	2.96	3.00	.....	.....	.....	4.53
1908	3.99	6.10	2.96	3.92	3.46	.....	.....	.....	4.39

It should be noted that for the year 1914, as shown in the tabulation, the rate for tuberculosis in the United States is lower than for any previous year recorded, being 2.69, as compared with 3.07 for 1913. The general rate for the American Army was 3.35, which is also lower than any previously recorded. All these places, except Alaska and Panama have higher rates than that for the United States. The figures for Hawaii become of more importance since the garrison there was increased. To summarize them, the rate for the United States is encouragingly low. The rates for Hawaii and Panama are lower than last year; the rates for China and the Philippine Islands higher than last year; and for the latter place higher than for any year mentioned.

The following tabulation shows, for the total American Army and for those parts stationed in the United States and the Philippine Islands, the rate for tuberculosis (all), for discharges, for disability, for deaths, and noneffectiveness for the last four years:

	Year.	Discharged for disability.	Deaths.	Noneffective.
Army, American troops	1914	2.07	0.47	1.77
	1913	2.26	.49	1.94
	1912	1.56	.31	1.40
	1911	2.88	.44	1.35
American troops, United States	1914	2.10	.47	2.23
	1913	2.16	.40	2.34
	1912	1.67	.27	1.65
	1911	2.85	.52	1.63
American troops, Philippine Islands	1914	3.41	.28	.60
	1913	3.95	.79	.66
	1912	1.46	.57	.53
	1911	3.77	.08	.29

An examination of Table No. 21, giving the occurrence of tuberculosis at Army posts in the United States, shows that Vancouver Barracks had the largest number of cases in 1913 and 1912 and 1911, although its rate for 1913 was less than one half of that of the other years.

The total number of cases of tuberculosis is smaller than in 1913. It is a matter for remark that the number at Vancouver Barracks is less than in 1913, 1912, or 1911.

TABLE No. 21.—*Tuberculosis (all) at Army stations, United States, continental (excluding Alaska), year 1914, compared with 1913 and 1912, officers and enlisted men.*

	Admissions.					
	1914		1913		1912	
	Number.	Ratio per 1,000 of mean strength.	Number.	Ratio per 1,000 of mean strength.	Number.	Ratio per 1,000 of mean strength.
Presidio of San Francisco, Cal	8	6.41	4	2.15	7	3.52
Walter Reed General Hospital, Takoma Park, D. C	6	42.86	3	32.26	3	18.07
Letterman General Hospital, San Francisco, Cal	5	26.60	2	10.87	1	5.35
Fort Sheridan, Ill	5	15.02	1	2.28	2	1.65
Fort Huachuca, Ariz	5	10.44	1	1.83	.....	.....
Fort Worden, Wash	5	7.76	4	2.73	.....	.....
Fort Sam Houston, Tex	5	4.56	4	3.21	10	9.23
Columbus Barracks, Ohio	5	3.31	5	4.22	8	6.69
Fort Stevens, Oreg	4	11.40	1	2.29	1	3.02
Fort Bliss, Tex	4	5.95	1	1.40	1	1.76
General Hospital, Fort Bayard, N. Mex	3	19.11	2	13.16	2	14.29
Fort Baker, Cal	3	11.76	1	3.39	2	5.04
Fort Niagara, N. Y	3	10.56	2	7.22	.....	.....
Fort McIntosh, Tex	3	6.91	4	10.50	2	7.84
Fort Moultrie, S. C	3	6.40	1	2.15	2	4.18
Fort McKinley, Me	3	4.78	.....	.....	1	1.32
Fort Logan, Colo	3	4.62	1	1.71	2	3.10
Fort Riley, Kans	3	4.57	1	.76	3	1.53
Fort H. G. Wright, N. Y	3	4.49	2	2.95	1	1.46
Presidio of Monterey, Cal	3	3.91	4	3.54	7	8.24
Fort Hancock, N. J	3	3.89	2	2.76	4	5.34
Fort Sill, Okla	3	2.96	1	1.03	.....	.....
Fort Slocum, N. Y	3	2.05	5	4.60	11	8.48
Fort Du Pont, Del	2	5.48	4	7.78	1	1.79
Fort Lawton, Wash	2	4.56	1	2.53	2	5.68
Fort Strong, Mass	2	4.35	1	2.62	.....	.....
Fort Williams, Me	2	3.77	4	6.93	2	3.34
Madison Barracks, N. Y	2	3.33	.....	.....	.....	.....
Fort Hamilton, N. Y	2	3.28	4	7.30	.....	.....
Fort Myer, Va	2	2.85	1	1.72	2	2.80
Plattsburg Barracks, N. Y	2	2.56	3	3.84	1	1.22
Fort Monroe, Va	2	1.77	3	2.70	1	.73
Jefferson Barracks, Mo	2	1.34	4	3.60	8	6.54
Vancouver Barracks, Wash	1	.98	10	7.73	23	16.79
Fort Ethan Allen, Vt	1	1.07	3	4.62	2	2.50
Fort McDowell, Cal	1	.97	3	3.85	6	8.86
Fort Jay, N. Y	1	2.38	.....	.....	3	7.33
Fort Leavenworth, Kans	.....	.....	5	4.96	5	2.37
Fort Douglas, Utah	.....	.....	4	5.03	1	1.14
Fort Flagler, Wash	.....	.....	.....	.....	4	12.86
Fort Andrews, Mass	.....	.....	1	2.47	4	9.28
Fort Benjamin Harrison, Ind	.....	.....	1	5.59	4	5.38
Fort D. A. Russell, Wyo	.....	.....	.....	.....	4	1.73
Fort Barry, Cal	.....	.....	.....	.....	3	9.40
Fort McPherson, Ga	.....	.....	2	2.66	3	3.94
15 stations not included above had 1 case each in 1914	15	.....	.....	.....	.....	.....
9 stations not included above had 2 cases each in 1913	.....	.....	18	.....	.....	.....
22 stations not included above had 1 case each in 1913	.....	.....	22	.....	.....	.....
11 stations not included above had 2 cases each in 1912	.....	.....	.....	.....	22	.....
16 stations not included above had 1 case each in 1912	.....	.....	.....	.....	16	.....
Field, miscellaneous, etc	45	.....	41	.....	9	.....
Total	175	2.72	187	2.98	196	3.19

TABLE NO. 22.—*Occurrence of tuberculosis (all) among American troops, Army, year 1914, by years of service, enlisted men.*

	Years of service.						Total.
	First.	Second.	Third.	Fourth.	Fifth.	Sixth and over.	
United States, continental (excluding Alaska):							
Mean strength							61,362
Admitted	48	24	25	14	4	50	165
Ratio per 1,000 of mean strength							2.69
Duty	7	4	2			7	20
Died	5	3	3	1		7	19
Discharged on certificate of disability	15	5	12	3	3	15	53
Otherwise	1	1	1			1	4
Remaining Dec. 31, 1914	20	11	7	10	1	20	69
Alaska:							
Mean strength							915
Admitted					1		1
Ratio per 1,000 of mean strength							1.09
Died					1		1
Philippines:							
Mean strength							10,253
Admitted	30	15	16	2		12	75
Ratio per 1,000 of mean strength							7.31
Duty		3	1			1	5
Discharged on certificate of disability	11	5	5			1	22
Otherwise	1		1				2
Remaining Dec. 31, 1914	18	7	9	2		10	46
Hawaii:							
Mean strength							7,971
Admitted	12	2	3	1		6	24
Ratio per 1,000 of mean strength							3.01
Duty	1		1				2
Died	1					2	3
Discharged on certificate of disability	4	1	1			2	8
Otherwise	1						1
Remaining Dec. 31, 1914	5	1	1	1		2	10
Canal Zone, Panama:							
Mean strength							2,010
Admitted	1	2		2			5
Ratio per 1,000 of mean strength							2.49
Remaining Dec. 31, 1914	1	2		2			5
Expeditionary force, Vera Cruz, Mexico:							
Mean strength							2,266
Admitted	1	5	2	1	1	1	11
Ratio per 1,000 of mean strength							4.85
Duty					1		1
Died				1			1
Discharged on certificate of disability			1				1
Remaining Dec. 31, 1914	1	5	1			1	8
China:							
Mean strength							1,047
Admitted		1	1	1		4	7
Ratio per 1,000 of mean strength							6.69
Duty			1				1
Died				1		2	3
Discharged on certificate of disability						1	1
Remaining Dec. 31, 1914		1				1	2
Transports:							
Mean strength							1,404
Admitted	4						4
Ratio per 1,000 mean strength							2.85
Discharged on certificate of disability	1						1
Remaining Dec. 31, 1914	3						3
Total:							
Mean strength							87,228
Admitted	96	49	47	21	6	73	292
Ratio per 1,000 mean strength							3.35
Duty	8	7	5		1	8	29
Died	6	3	3	3	1	11	27
Discharged on certificate of disability	31	11	19	3	3	19	86
Otherwise	3	1	2			1	7
Remaining Dec. 31, 1914	48	27	18	15	1	34	143

UNDETERMINED FEVERS.

The admission rate for these fevers for the United States was 1.49 per 1,000, as compared with 2.65 for 1913, 1.94 for 1912, 2.50 for 1911, and 2.42 for 1910. In this connection, it should be remembered that in questions of doubt procedures as used in the laboratory diagnosis of typhoid and paratyphoid are carried out to exclude any possibility of overlooking these two diseases.

TABLE NO. 23.—*Undetermined fevers, 1914, by countries—officers and enlisted men including Philippine Scouts and Porto Rican troops.*

Diseases.	United States (continental), excluding Alaska.	Philippine Islands.	Hawaii.	Vera Cruz, Mexico.	Army transports.	Porto Rico.	Total.
Febricula	25	24	4	1	7	1	62
Fever, simple continued	19	1	3	.....	1	.....	24
Fever, type undertermined	37	43	4	29	1	.....	114
Ephemeral fever	15	.....	.....	.....	.....	.....	15
Total	96	68	11	30	9	1	215
Ratio per 1,000 mean strength	1.49	4.27	1.33	12.49	6.10	1.41	2.21

MENTAL ALIENATION.

It is impracticable to compare the admission rate for this class of disturbances with the rate for diseases formerly classified and published under the term "insanity." The diseases included under the term "mental alienation" used in the present nomenclature, which was put into use January 1, 1912, include several conditions not included under the term insanity, such as defective mental development, constitutional psychopathic state, hypochondriasis, and nostalgia. The case admission rate for this class of diseases was 3.83 per 1,000, and the discharge rate was 3.02, as compared with 2.92 and 2.24, respectively, for 1913.

ALCOHOLISM.

The admission rate for alcoholism in the United States for the year 1914 was 13.46, which is lower than the preceding year, when it was 14.24. It is gratifying to observe that this rate has shown a steady diminution since 1907, following an equally steady rise for eight years before 1907. The rate for 1914 is the lowest for any year since 1870. This matter, after all, appears to be closely associated with the public attitude with reference to alcoholic drinks. It would appear that the opinion of the country is generally getting away from alcohol in any form as a beverage. While "near beer," supposed to contain not more than 2 per cent of alcohol, is still sold at some posts, it is thought that even this will no longer be much in demand. There really appears to be no more reason why alcoholic drinks should be sold on Government reservations to soldiers than there now appears to us to be any reason for the regulation issue of grog of former days.

These rates do not represent the amount of intemperance existing in the Army, but as they are all calculated from similar data, that is, the number of cases in which medical assistance was invoked, they are useful as indices of alcoholic excess. This marked decrease in the admission rate for 1914 is believed to be largely due to the effect produced by the act of Congress stopping the pay of officers and enlisted men when incapacitated for duty on account of sickness due to drug addiction, alcoholism, or other misconduct.

SMALLPOX.

Seven cases of smallpox occurred during the year, with one death. In 1913 there were two cases, without a death. Recent War Department orders relative to revaccination will, it is hoped, make more thorough the protection afforded by vaccination.

MEASLES.

During the year 1914, 448 cases of measles occurred in the Army in the United States, with 8 deaths and 1 discharge. In 1913 there were 457 cases, with 11 deaths and 1 discharge.

CEREBROSPINAL MENINGITIS.

Fourteen cases of this disease, with 5 deaths, occurred in the Army in the United States during 1914. In 1913 there were 32 cases, with 11 deaths.

INFLUENCE OF STATION.

The posts having the highest admission rate this year are Forts Bliss, Tex.; Greble, R. I.; and Banks, Mass., the rates being, 1,200.89, 965.19, and 949.58, respectively.

The posts having the highest noneffective rate for the year are Fort Sam Houston, Tex., Fort Bliss, Tex., and Fort Huachuca, Ariz., in the order named. The rates were 110.61, 96.24, and 55.57 per 1,000. The average number of days' treatment for each case at Fort Sam Houston was 51.69; Fort Bliss, 29.21; and Fort Huachuca, 27.68.

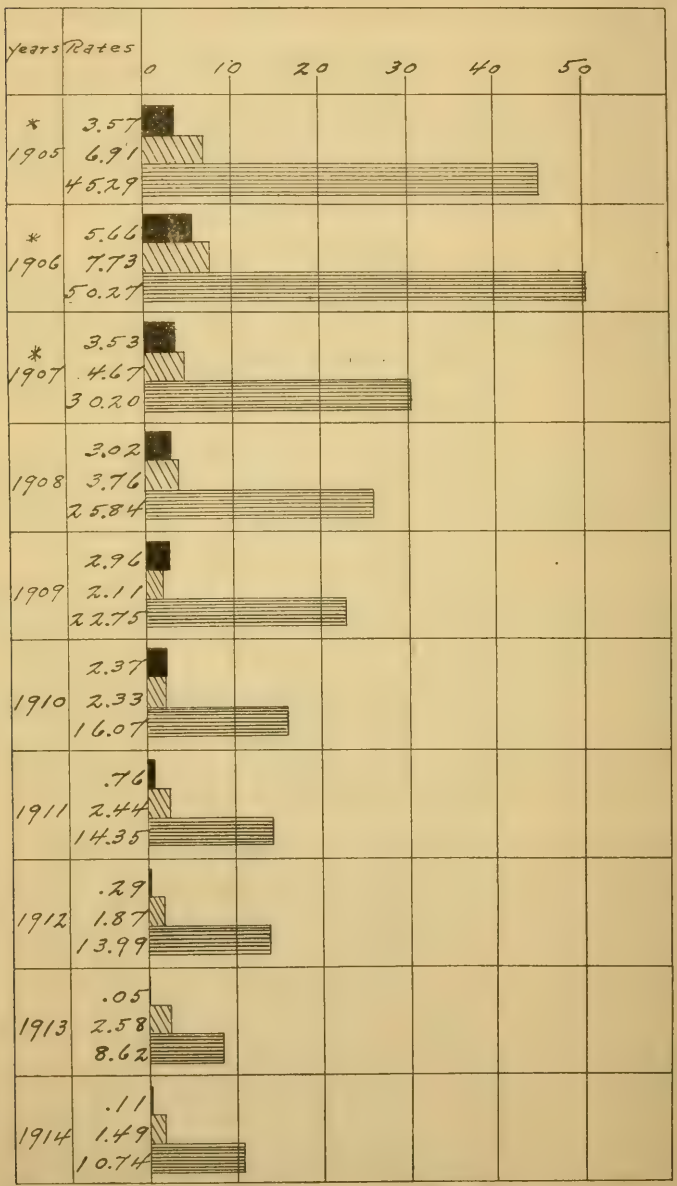
The three posts having the lowest admission rate for the year are Fort Winfield Scott, Cal., Fort Monroe, Va., and Fort Casey, Wash., the rates being 191.42, 271.20, and 293.55. The posts having the lowest noneffective rates were Fort Hamilton, N. Y., Fort Monroe, Va., and Fort Miley, Cal. These rates were 5.07, 6.50, and 7.21, respectively, and their average length of treatment for each case 5.56, 8.75, and 5.59 days.

Of the recruiting depots, Fort Logan, Colo., had the highest admission rate, 1,629.23, and Fort McDowell, Cal., the lowest, 715.95; Jefferson Barracks, Mo., had the highest average number of days' treatment for each case, 13, and Fort McDowell, Cal., the lowest, 6.76. Fort Logan had the highest noneffective rate, 45.83, and Fort McDowell the lowest, 13.26. The highest death rate occurred at Jefferson Barracks, Mo., 6.04 per 1,000, and the lowest at Fort Logan, Colo., 3.08.

Chart R.

Typhoid Fever, Undetermined Fevers, Malarial Fevers.
Admission Rates.

Admission rates for Typhoid Fever, Undetermined Fevers, Malarial Fevers, United States {Officers and enlisted men} years, 1905–1914.

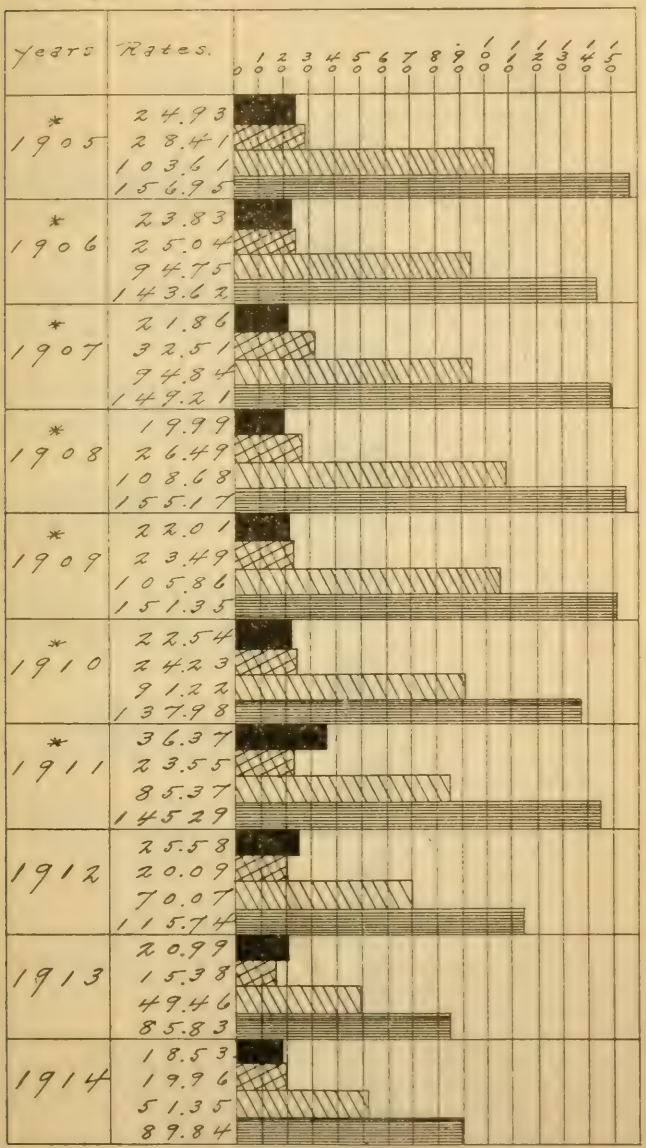


Typhoid Fever. Undetermined Malarial Fevers.
* Enlisted men. Officers not included.

Chart 5.

Syphilis, Chancroid, Gonorrhœa and Total Venereal.
Admission Rates.

Admission rates for Syphilis, Chancroid, Gonorrhœa, and Total Venereal for the United States {enlisted men} years, 1905–1914.

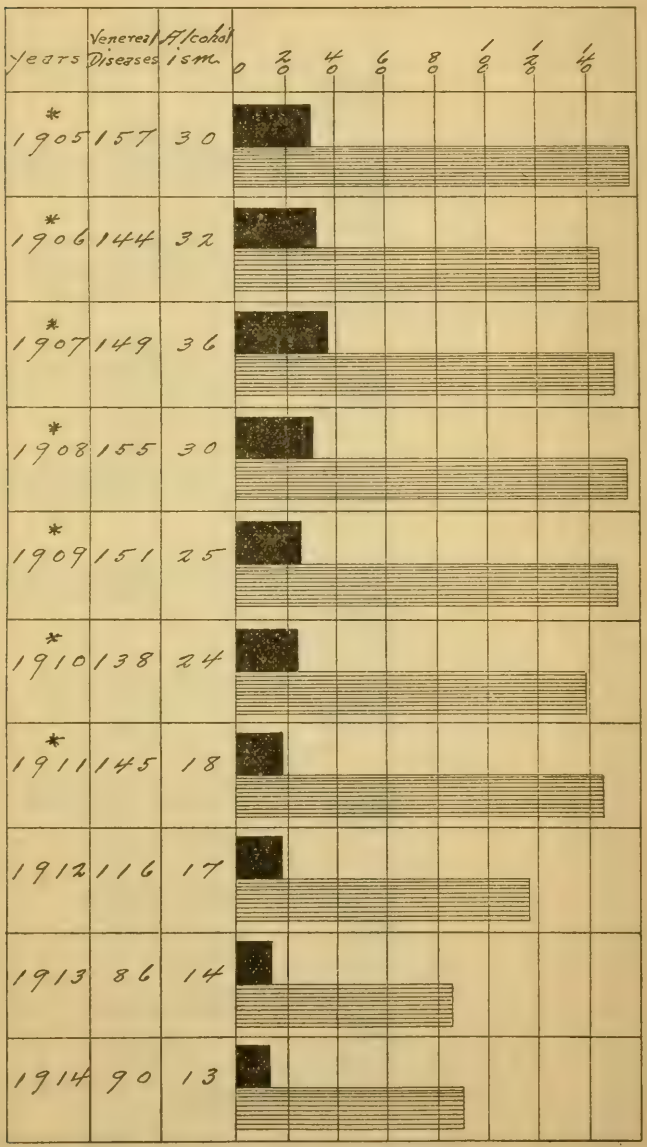


Syphilis. Chancroid. Gonorrhœa. Total.

* Readmitted cases deducted to correspond with figures for years preceding 1905, and 1912 to 1914.

Chart I.

Venereal Diseases and Alcoholism.
Admission Rates.
Admission rates for Venereal Diseases and Alcoholism for the United States {enlisted men} Years, 1905–1914.



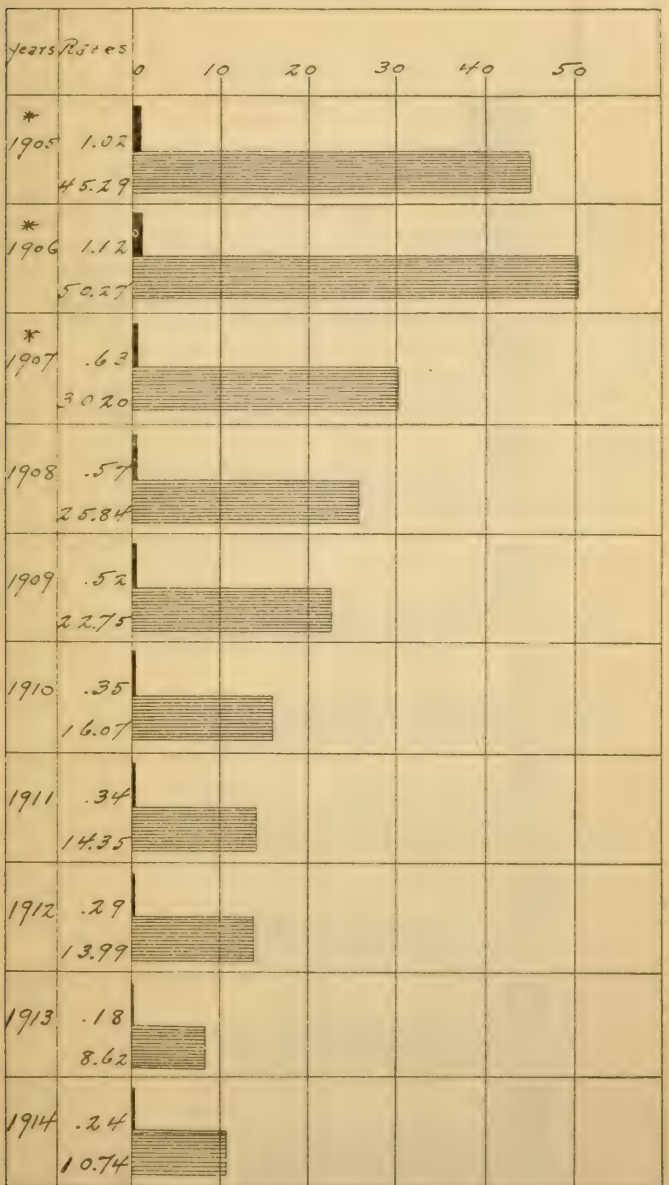
*Readmitted cases deducted to correspond with figures for years preceding 1905, and 1912 to 1914.

Chart U

Malarial Fevers.

Admission and Noneffective Rates.

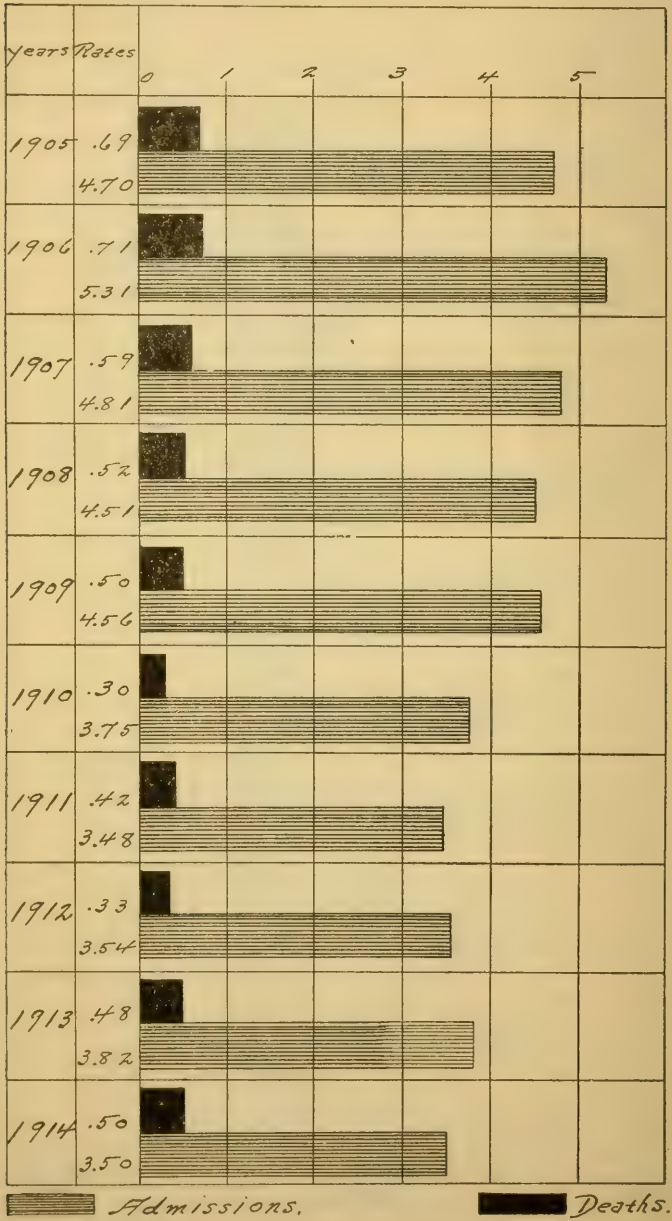
Admission and Noneffective rates for Malarial fevers for the United States & Officers and enlisted men, years, 1905–1914.



*Enlisted men. Officers not included.

Chart V

Tuberculosis
Admission and Death Rates.
Admission and Death rates for Tuberculosis for The Army, {Officers, and American and Native enlisted men} years, 1905–1914.



The Western Department had the lowest admission rate, 437.09, as compared with 567.44 for the Eastern Department, 704.66 for the Central Department, and 784.55 for the Southern Department.

The Western Department had also the lowest noneffective rate, 9.33 per 1,000, as compared with 14.35 for the Eastern, 19.88 for the Central, and the excessively high rate of 56.97 for the Southern.

The Western Department had also the lowest average number of days' treatment for each case, 7.79, as compared with 9.23 for the Eastern, 10.30 for the Central, and 26.51 for the Southern.

Tables Nos. 24 and 25 show the posts having the highest and lowest ratios of admission and noneffectiveness in the United States as a whole.

INFLUENCE OF RACE.

The colored troops had higher rates than the white for noneffective, deaths, and discharges, being 33.73, 9.85, and 27.90, as compared with 23.05, 4.66, and 14.42. The admission rate for white troops was, however, higher, being 630.13, as compared with 620.35.

For venereal diseases the admission rate for the colored troops was 52.52, and for the white, 90.99; for alcoholism the rate for the white troops was 13.82, and for the colored, 1.64; for tuberculosis (all kinds) the rate for colored was 3.28, and for white, 2.67; for bronchitis the rate for colored was 42.67, and for white, 35.14; for diarrhea and enteritis the rate for the white was 24.83, and for the colored, 49.23; and for tonsillitis, acute follicular, the rate for white was 46.93, and for the colored, 48.14. The relative prevalence of the other several diseases in the two races are shown in Table No. 71, at the end of the report.

TABLE No. 24.—*Posts of the United States having the highest admissions and noneffective rates per 1,000 of mean strength among those having a total strength of over 200 officers and men, year 1914.*

	Mean strength.	Ratio per 1,000 of mean strength.											Average number of days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective rate.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
										From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.					
		From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
Posts in order of highest admission rates from all causes:																	
Fort Bliss, Tex	672	**1,200.89**	767.86	35.66	21.71	19.35	11.90	55.01	33.61	96.24	94.67	55.25	54.35	35.12	29.21	20.16	26.26
Fort Greble, R. I	316	**965.19**	639.24	9.74	9.74	6.33	3.16	16.07	12.90	22.69	19.68	14.68	13.16	8.28	8.58	5.36	8.39
Fort Banks, Mass	238	**949.58**	571.43	.....	.....	4.20	4.20	4.20	4.20	18.19	17.50	11.29	10.83	6.64	6.99	4.12	7.21
Fort Oglethorpe, Ga	441	**909.30**	435.37	7.14	2.38	4.54	.....	11.68	2.38	32.74	26.59	9.52	7.32	11.95	13.14	3.48	7.98
Fort Sheridan, Ill	333	**876.88**	546.55	31.54	15.77	15.02	6.01	46.56	21.78	32.14	30.47	14.47	13.95	11.73	13.38	5.28	9.66
Posts in order of highest admission rates, excluding venereal diseases, injuries, etc.[a]																	
Fort Bliss, Tex	672	1,200.89	**767.86**	35.66	21.71	19.35	11.90	55.01	33.61	96.24	94.67	55.25	54.35	35.12	29.21	20.16	26.26
Fort Greble, R. I	316	965.19	**639.24**	9.74	9.74	6.33	3.16	16.07	12.90	22.69	19.68	14.68	13.16	8.28	8.58	5.36	8.39
Fort Banks, Mass	238	949.58	**571.43**	.....	.....	4.20	4.20	4.20	4.20	18.19	17.50	11.29	10.83	6.64	6.99	4.12	7.21
Fort Ontario, N. Y	253	873.52	**569.17**	4.17	4.17	7.91	3.95	12.08	8.12	16.07	14.27	10.30	9.06	5.87	6.71	3.76	6.60
Fort Sheridan, Ill	333	876.88	**546.55**	31.54	15.77	15.02	6.01	46.56	21.78	32.14	30.47	14.47	13.95	11.73	13.38	5.28	9.66
Posts in order of highest noneffective rates from all causes:																	
Fort Sam Houston, Tex	1,096	782.85	424.27	124.52	96.01	10.95	7.30	135.47	103.31	**110.61**	107.03	66.81	65.46	40.37	51.69	24.39	57.72
Fort Bliss, Tex	672	1,200.89	767.86	35.66	21.71	19.35	11.90	55.01	33.61	**96.24**	94.67	55.25	54.35	35.12	29.21	20.16	26.26
Fort Huachuca, Ariz	479	732.78	486.43	13.10	6.55	22.96	16.70	36.06	23.25	**55.57**	48.27	27.60	23.20	20.28	27.68	10.06	20.67
Fort Oglethorpe, Ga	441	909.30	435.37	7.14	2.38	4.54	.....	11.68	2.38	**32.74**	26.59	9.52	7.32	11.95	13.14	3.48	7.98
Fort Sheridan, Ill	333	876.88	546.55	31.54	15.77	15.02	6.01	46.56	21.78	**32.14**	30.47	14.47	13.95	11.73	13.38	5.28	9.66

Posts in order of highest non-effective rates, excluding venereal diseases, injuries, etc.:

Fort Sam Houston, Tex.	1,096	782.85	424.27	124.52	96.01	10.95	7.30	135.47	103.31	110.61	107.03	66.81	65.46	40.37	31.69	21.39	57.72
Fort Bliss, Tex.	672	1,200.89	767.86	35.66	21.71	19.35	11.90	55.01	33.61	96.24	94.67	55.25	34.35	35.12	29.21	20.16	28.36
Fort Huachuca, Ariz.	479	732.78	486.43	13.10	6.55	22.96	16.70	36.06	23.25	55.57	48.27	27.60	23.20	20.28	27.68	10.06	20.67
Fort Andrews, Mass.	448	747.18	523.70	16.28	13.95	2.26	2.26	18.54	16.21	27.47	24.21	17.35	16.65	9.30	12.44	6.33	12.09
Fort Rosecrans, Cal.	248	344.35	342.74	.....	.....	12.10	.....	12.10	.....	26.91	25.36	16.88	15.63	9.82	18.04	6.16	17.98

TABLE No. 25. *Posts of the United States having the lowest admission and noneffective rates per 1,000 of mean strength among all those having a total strength of over 200 officers and men, year 1914.*

	Mean strength.	Ratio per 1,000 of mean strength.											Average number of days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective rate.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
										From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.					
		From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
Posts in order of lowest admission rates from all causes:																	
Fort Winfield Scott, Cal.[1]	956	**191.42**	118.20	.....	.....	2.09	.....	2.09	.....	0.66	(1)	0.05	(1)	0.24	1.26	0.02	0.15
Fort Monroe, Va	1,132	**271.20**	147.52	7.36	7.36	3.53	.....	10.89	7.36	6.50	5.90	3.83	3.53	2.37	8.75	1.40	9.47
Fort Casey, Wash	310	**293.55**	193.55	6.64	3.32	3.23	.....	9.87	3.32	9.76	8.75	4.84	4.60	3.56	12.13	1.77	9.13
Fort Hamilton, N. Y	610	**332.79**	245.90	3.40	3.40	4.92	3.28	8.32	6.68	5.07	4.75	3.66	3.36	1.85	5.56	1.34	5.44
Fort Lawton, Wash	439	**355.35**	182.23	2.39	2.39	2.28	2.28	4.67	4.67	11.71	11.48	8.63	8.44	4.27	12.03	3.15	17.29
Posts in order of lowest admission rates, excluding injuries, etc.:																	
Fort Winfield Scott, Cal.[1]	956	191.42	**118.20**	.....	.....	2.09	.....	2.09	.....	.66	(1)	.05	(1)	.24	1.26	.02	.15
Fort Monroe, Va	1,132	271.20	**147.52**	7.36	7.36	3.53	.....	10.89	7.36	6.50	5.90	3.83	3.53	2.37	8.75	1.40	9.47
Fort Lawton, Wash	439	355.35	**182.23**	2.39	2.39	2.28	2.28	4.67	4.67	11.71	11.48	8.63	8.44	4.27	12.03	3.15	17.29
Fort Casey, Wash	310	293.55	**193.55**	6.64	3.32	3.23	.....	9.87	3.32	9.76	8.75	4.84	4.60	3.56	12.13	1.77	9.13
Fort Yellowstone, Wyo	330	390.91	**196.97**	3.14	3.14	.....	.....	3.14	3.14	11.07	10.24	5.16	5.01	4.04	10.34	1.88	9.57
Posts in order of lowest noneffective rates from all causes:																	
Fort Hamilton, N. Y	610	332.79	245.90	3.40	3.40	4.92	3.28	8.32	6.68	**5.07**	4.75	3.66	3.36	1.85	5.56	1.34	5.44
Fort Monroe, Va	1,132	271.20	147.52	7.36	7.36	3.53	.....	10.89	7.36	**6.50**	5.90	3.83	3.53	2.37	8.75	1.40	9.47
Fort Miley, Cal	206	470.87	271.84	.....	.....	.....	.....	.....	.....	**7.21**	4.26	3.82	2.45	2.63	5.59	1.39	5.12
Alcatraz Island, Cal	205	448.78	297.56	.....	.....	4.88	4.88	4.88	4.88	**7.42**	5.44	4.81	3.46	2.71	6.03	1.76	5.90
Fort Barry, Cal	241	597.51	402.49	.....	.....	4.15	.....	4.15	.....	**7.73**	6.97	5.06	4.83	2.82	4.72	1.85	4.59

effective rates, excluding injuries, etc.:																	
Fort Hamilton, N. Y.	610	332.79	245.90	3.40	3.40	4.92	3.28	8.32	6.68	5.07	4.75	3.66	3.36	1.85	5.56	1.34	5.44
Fort Miley, Cal.	206	470.87	271.84							7.21	4.26	3.82	2.45	2.63	5.59	1.39	5.12
Fort Monroe, Va.	1,132	271.20	147.52	7.36	7.36	3.53		10.89	7.36	6.50	5.90	3.83	3.53	2.37	8.75	1.40	9.47
Fort Baker, Cal.	255	423.53	247.06							9.07	7.74	4.59	4.10	3.31	7.81	1.67	6.78
Fort Washington, Md.	272	485.29	290.44	7.69	3.85	3.68		11.37	3.85	10.39	9.89	4.70	4.56	3.79	7.82	1.72	5.91
Recruit depots:																	
Fort Logan, Colo.	650	1,629.23	1,189.23	23.70	18.96	3.08	3.08	26.78	22.04	45.83	38.84	31.65	28.42	16.72	10.27	11.55	9.71
Fort Slocum, N. Y.	1,461	1,568.10	1,054.07	42.05	37.14	3.42	2.05	45.47	39.19	40.46	35.56	26.89	24.05	14.77	9.42	9.81	9.31
Columbus Barracks, Ohio.	1,511	928.52	634.68	23.52	16.13	3.97	3.31	27.49	19.44	21.48	20.65	13.71	13.04	7.84	8.44	5.01	7.89
Jefferson Barracks, Mo.	1,191	753.19	508.38	9.53	8.85	6.04	5.37	15.57	14.22	26.82	26.59	17.25	17.15	9.79	13.00	6.30	12.39
Fort McDowell, Cal.	1,028	715.95	497.08	17.80	15.83	5.84	3.89	23.64	19.72	13.26	12.72	9.13	8.97	4.84	6.76	3.34	6.71

[1] No hospital, the sick are treated in the general hospital.

TABLE No. 26.—*Influence of disease on enlisted men, American troops, serving in the United States, by arms of service for year 1914.*

Arms of service.	Mean strength.	Admitted.	Discharged on certificate of disability.	Died.	Constantly non-effective.	Ratio per 1,000 of mean strength. Admitted.	Discharged on certificate of disability.	Died.	Constantly non-effective.
Infantry	15,216	8,804	317	76	303.07	578.60	20.66	4.95	19.9
Cavalry	10,995	7,993	119	67	231.83	726.97	10.74	6.04	21.0
Coast Artillery	14,770	7,843	213	63	214.02	531.01	14.30	4.23	14.4
Field Artillery	3,194	2,510	41	9	78.49	785.85	12.73	2.80	24.5
Engineers	1,184	922	23	7	34.30	778.72	19.26	5.86	28.9
Ordnance	644	369	1	3	8.44	572.98	1.54	4.62	13.1
Signal Corps	713	424	12	1	13.34	594.67	16.69	1.39	18.7
Hospital Corps	2,801	1,563	39	18	60.71	558.02	13.81	6.37	21.6
All others	11,845	8,220	152	54	211.86	693.96	12.73	4.52	17.8
Total	61,352	38,648	917	298	1,156.07	629.84	14.82	4.82	18.8

TABLE No. 27.—*Influence of season, United States continental (excluding Alaska) year 1914—officers and enlisted men.*

Month.	Mean strength.	Ratios per 1,000 of mean strength. All causes. Admissions. Total.	Admissions. Hospital.	Deaths.	Non-effective. Total.	Non-effective. Hospital.	Exclusive of venereal diseases, alcoholism, vaccinia, and injuries. Admissions.	Deaths.	Noneffective.	Prevailing diseases (exclusive of venereal diseases, vaccinia, alcoholism, and injuries).
January	65,313	57.95	46.85	0.37	23.08	20.38	36.73	0.18	14.76	Tonsillitis, 355; acute bronchitis, 317
February	64,752	57.20	45.95	.33	25.55	22.30	38.42	.18	17.08	Acute bronchitis, 368; tonsillitis, 347 mumps, 114.
March	64,289	65.74	52.76	.43	26.49	23.11	45.47	.32	18.00	Tonsillitis, 440; acute bronchitis, 375 influenza, 197.
April	62,907	54.60	44.46	.44	24.54	21.52	35.86	.32	16.48	Tonsillitis, 302; acute bronchitis, 205 influenza, 125.
May	63,377	51.68	38.99	.54	22.58	19.48	32.08	.20	14.80	Tonsillitis, 244; diarrhea and enteritis, 188; acute bronchitis, 156.
June	62,516	52.34	38.94	.43	24.18	20.82	31.64	.16	15.42	Diarrhea and enteritis, 192; tonsillitis, 180; acute bronchitis, 128.
July	62,955	49.75	35.99	.49	23.55	20.34	29.51	.21	15.16	Diarrhea and enteritis, 210; tonsillitis, 138.
August	62,484	48.28	35.67	.43	22.71	19.84	27.86	.20	14.43	Diarrhea and enteritis, 177; tonsillitis, 120; malaria, 101.
September	63,699	46.38	33.96	.40	22.49	19.46	27.38	.12	14.00	Diarrhea and enteritis, 195; malaria 146; tonsillitis, 121; furuncle, 102.
October	65,154	46.55	33.55	.40	22.41	19.08	26.54	.23	13.58	Diarrhea and enteritis, 148; tonsillitis, 136; acute bronchitis, 103.
November	65,296	43.70	30.97	.27	22.18	19.04	24.70	.11	13.51	Tonsillitis, 205; acute bronchitis, 106 diarrhea and enteritis, 103.
December	69,540	48.35	33.66	.35	21.58	18.07	29.75	.23	13.21	Tonsillitis, 383; acute bronchitis, 189
Total	64,357	622.28	471.37	4.87	23.41	20.25	385.83	2.47	15.00	Tonsillitis, acute, 2,971; bronchitis acute, 2,221; diarrhea and enteritis 1,671; influenza, 822; malaria, 691 mumps, 550; rhinitis, acute, 486 measles, 452.

SANITATION, UNITED STATES.

The general sanitary conditions throughout the Army for the year continue good. But few defects of importance were reported on the monthly sanitary statement, and where possible they were promptly corrected through the cooperation of the commanding officers and quartermasters. In some instances considerable appropriations of moneys were required, and therefore these matters could not always be promptly improved.

The conditions that led to excessive rates for malarial disease on the Isthmus of Panama in 1913 have not prevailed to the same extent for 1914. Oil and larvicide, as well as labor, have been provided in connection with the sanitation of the posts in the Canal Zone.

The department surgeon, Eastern Department, states, concerning venereal disease:

That this office requires the surgeons at posts to keep active cases in hospital where practicable.

Also that:

At some of the isolated posts it has been deemed advisable to recommend the gratuitous issue of filled prophylactive tubes. It was proposed to establish in Boston a station where the men of the harbor posts could be treated. This was not deemed practicable, although much time would have been saved over the present method, because of the nature of the transportation facilities. It is believed that the present system of prophylaxis for the prevention of veneral diseases would be effective could it be carried out properly and that the men be disinfected within six or seven hours after exposure. It is also believed that a large number of venereal diseases in the department result from exposure more than once during the week, with only one disinfection treatment during that period. There is no doubt but that many men avail themselves of this procedure without laying themselves liable to court-martial. In addition to the use of protective tubes and the dispensary disinfection, it is believed much could be accomplished toward the eradication of venereal diseases by carrying out the instructions of paragraph 1, General Orders, No. 17, War Department, 1912, the value of which appears to be underestimated by the majority of post commanders in this department. Post commanders should wherever practicable arrange for the amusement, entertainment, and instruction of the enlisted men of their respective commands through the encouragement of healthful exercises and physical recreation, cleanly social and interesting mental occupations, indoor and outdoor sports, such as baseball, tennis, golf, handball, basketball, etc., in season; moving pictures, vaudeville entertainments, concerts, dances, weekly lectures on suitable subjects by officers of the post; biweekly instruction by medical officers on the elements of physiology and anatomy, personal hygiene and care of the body, especially on sexual physiology and the dangers from venereal diseases and the use of alcoholic beverages. Special attention should be paid to the club features of the post exchange, the library and reading room, billiard and pool rooms, gymnasium, card room, bowling alleys, counter for soft drinks and lunch. Provision should also be made for the entertainment of the soldiers' families in the soldiers' club once or twice weekly. The establishment of the post exchange was intended to conduce to the pleasure and comfort of the men more than for raising dividends for company funds.

This officer further remarks relative to dental surgeons:

The service of the dental surgeons has been more satisfactory in the last year than heretofore, because a greater amount of time was spent at each post. The itinerary system gives each post its pro rata share of the dentist's time, but with only 14 of them to 22,000 enlisted it is evident that we have not reached the point where all the necessary dental work may be accomplished, as contemplated by Congress, namely, one dental surgeon to every 1,000 enlisted. While the regulations are quite clear that "emergency work for officers and enlisted men will have preference at all times over other work," yet the same regulations prescribe the services of the dentist for all those entitled to free medical treatment, with the result that our dentists are attempt-

ing to serve an average of over 2,300 each (including officers, enlisted men, families, servants, and civilian employees).

On the subject of "Civilian employees," who assist in performing the clerical work of the office, the department surgeon states:

I would again invite attention to the salaries of the clerks in this office, which have not been increased for a number of years and which I regard as inadequate.

The situation in the Southern Department has continued to be an unusual one, the average strength of the command being nearly two and one-half times as great as that for 1913. At the close of the year approximately 45 per cent of the mobile army of the United States was in this department. A large portion of these troops were in camps. The department surgeon reports:

The post hospitals at Forts Sam Houston and Bliss, Tex., and Huachuca, Ariz., suddenly expanded into base hospitals for large commands, have handled great numbers of sick. * * * It must be confessed that, with inadequate and shifting commissioned personnel, lack of female nurses, imperfectly trained attendants, overcrowding, necessity for extra care and study of the numerous surgical, obscure, and difficult cases, press of post duties (sanitation, official boards, detached service, and the like), the care of the sick and the general management of these hospitals has at times suffered severely.

It is further stated that:

The question of shelter is perhaps the most important one needing attention. Tentage has rapidly deteriorated, the factors of alternate rains, fierce sunlight, and high winds tending to rot and tear the canvas in a short time. In a few camps of some permanence—as those of the Ninth Cavalry at Douglas and of the Thirteenth Cavalry at Columbus—the problem has been met, in part, by the erection of adobe huts. This has been accomplished by the labor of troops, and the only expense has been for roofing and sash materials and a little lumber for benches, tables, and shelving. The expense has been borne by troop funds, which ought not to be the case. A moderate allotment of quartermaster funds for the purpose indicated would result in much saving of tentage, while keeping this material in good condition for its utilization when necessary.

With reference to medical supplies he states:

The medical supply articles used in venereal prophylaxis should be included in the regimental equipment, and placed on the Field Supply Table. For tropical and subtropical climates a liberal supply of emetin hydrochloride, 32 mgm. hypodermic tablets, should be added to the medical chest, and placed on the Field Supply Table. The foot powder and adhesive plaster supplied for organizations' surplus kits should be reserved for service when the command is actually in the field or is separated from a detachment of the Medical Department. In this command this regulation is being enforced, but unless special directions are given the squad leaders will expend these supplies for purposes for which they were not intended, and, when the command actually takes the field, many kits will be found short of these supplies. During peace and in garrison their presence should be verified by organization commanders, just as are other contents of the surplus kits verified.

The following is quoted from the report of the surgeon, Fort Apache:

The enlisted personnel of the Hospital Corps should be at least trained nurses. If the course of training for male nurses as outlined in the best civilian hospitals were to be given conscienciously to the recruit in the Hospital Corps, and if medical officers in general would spend a proportionate amount of time with his men, as a troop commander does with his men, the general efficiency of the Hospital Corps would be increased.

The following is quoted from the report of the surgeon, Ninth Infantry, Laredo:

Venereal diseases moderate in number. During the first month or two in camp there was a rather large number of cases of venereal disease—April, May, and June from 9 to 12 per 1,000 of strength. Since July there has been a small number of cases,

new cases varying from 1.8 to 4 per 1,000 of strength, including cases carded for record only (the large proportion). This rather small proportion of venereal diseases is attributed to new methods of handling the disease, the regular semimonthly inspection of all men, the prophylactic treatment, restriction, and especially probably the regulation regarding the loss of pay. The present method of prophylaxis for venereal disease is considered by the writer to be a great success and a distinct advance. The use of the prophylactic has been moderately well carried out by the enlisted men of the command, from 250 to 350 treatments being administered each month. Regarding prophylaxis it is noticed that in majority of cases of venereal disease men have taken a prophylactic treatment during the period preceding onset of the disease. It is thought, however, that this does not indicate failure of the treatment, so much as the fact, believed to be common, that many men take the treatment after one or more exposures and then while drinking or having become careless expose themselves without taking the treatment; this within period covered by prophylactic card-

In conclusion the department surgeon, Southern Department, adds:

Attention is invited to the serious shortage of medical officers. During much of the time, regiments serving in the field and with some prospect of active service have had but one medical officer. Sometimes this officer is an inexperienced lieutenant, either of the regular or reserve corps. Such a condition is serious and even vital. Hospital Corps personnel has been fairly well maintained, although most regiments are below their *peace* strength in this particular.

The department surgeon, Central Department, states in his annual report for 1914:

Owing to the depleted personnel, the civil population including the families of officers and enlisted men has outnumbered the troops, and their care has constituted a large proportion of the work of the Medical Department.

The demand for officers required as inspector-instructors at militia camps during the summer exceeded the number of medical officers available for such duty. All conditions were cheerfully met, and the duties required of the medical officers were satisfactorily performed, no complaint being received as to unsatisfactory or inadequate service. The service of the medical officers assigned as *locum tenens* at posts was also satisfactory.

It is worthy of note that the additional work of general garrison duty, post guard, etc., during the past year has been performed by the field hospital and ambulance companies (No. 1) at Fort D. A. Russell, Wyo., there being no other troops at post.

Under the subject of "Health of command," he states:

With a mean strength of 2,270 at posts and 1,598 at camps in the field, total 3,868, the health of the troops has been generally satisfactory. Excepting at the camps in Colorado, there have been no serious sickness or epidemics. There was a slight outbreak of diarrhea at these camps during August, due to eating too much fruit, of which there was an abundant crop. The fruit in most instances had been sprayed with a solution of Paris green, and after the men were cautioned, and the fruit properly washed before eating, diarrhea soon ceased. Five cases of dysentery were also reported at these camps, and this slight outbreak was quickly checked by having the kitchen and dining tables screened with wire gauze. At Fort Leavenworth an extensive epidemic of measles prevailed among the children on the reservation during February and March, and a number of cases of mumps during the spring and summer. In November and December there was also an extensive outbreak of chicken pox, but none of these infections spread to the troops.

The present propaganda against venereal disease is proving efficient and has markedly lessened the number of cases, reducing it to a lower rate. At four posts in the department there has not been a single case, and at Fort Des Moines, Iowa, which formerly had a high rate, there has not been a case in 22 months. Some of the cases treated at posts were of men detailed on duty elsewhere, such as recruiting, etc., and most of the cases reported showed negligence of the individuals in making use of the prophylaxis. It is believed, however, that the men appreciate the benefit to be derived from prophylactic treatment, and it has been suggested by some medical officers that some form of collapsible tube be issued free upon application at an appropriate place.

The small number of admissions reported for alcoholism as compared with former years is exceedingly gratifying and shows a steady diminution in the use of stimulants by the troops and a consequent increase in efficiency.

There has not been a case of typhoid fever in the department during the year, which emphasizes the great value of typhoid prophylaxis. In towns and cities

adjacent to some of the posts in this department and camps in Colorado the disease was quite prevalent. The existing orders and regulations on this subject have been rigidly enforced.

WATER SUPPLY.

Improvement in the water supply is promised for several posts in the near future when allotment of funds promises the accomplishment of new plans. Most of the complaint this year has come from posts on the coast where the water is either inadequate or brackish.

There has been placed upon the Supply Table, "Bags, water, sterilizing," which was devised by a medical officer to permit the sterilization of water in the field by hypochlorite of calcium. An apparently satisfactory container has been manufactured by the Quartermaster Corps on the specifications laid down. It has been found that hypochlorite in sealed tubes will remain efficient for periods of from 10 to 12 months, if not longer. This appliance is lighter and more portable than other devices heretofore used in our service, and although still in the experimental stage gives promise of being a satisfactory article of field equipment.

BARRACKS AND QUARTERS.

A most important matter relating to barracks has come to the attention of this office during the year—the question of overcrowding at the recruit depots. The conditions in the recruiting service made it necessary at times to hold at some of the recruit depots a larger number of men than is ordinarily contemplated to be housed there. The overcrowding was apparently most marked at Columbus and Jefferson Barracks. At both these places serious epidemics of measles prevailed for a period of several months. On representations from this office of the seriousness of conditions at Columbus Barracks recruits were promptly sent away and eventually the barracks were practically stripped of all the permanent personnel. During these epidemics at these two posts, which began in the winter of 1914 and ended in the spring of 1915, 62 cases of measles appeared at Columbus Barracks and 141 at Jefferson Barracks, with 6 and 9 deaths, respectively. In the opinion of this office the seriousness of this menace of measles at recruit depots would be tremendously increased if for any reason mobilization and recruitment were required to take place on a large scale in the fall and winter months.

The disease itself is not ordinarily serious, and the deaths occurring are due to complications. It is spread almost invariably through close personal contact, and for this reason sleeping rooms where beds are crowded together afford, especially in the winter months with indifferent ventilation, ideal conditions for the dissemination of the infection. The prospects of having to provide even greater numbers of recruits in the future than in the past will make it necessary, if the disease and deaths consequent upon it are to be avoided, to modernize the barrack accommodations at the recruit depots or to radically change the system of housing them. With the large collection of material susceptible to measles (and such a body of recruits always will be) it is impossible at present to prevent the introduction of the disease among them through the arrival of cases at the barracks who are in the earlier stages or suffering from mild attacks of the disease.

CLOTHING.

The authority granted by paragraph 77 (*c*), Uniform Regulations, permitting the use of the campaign hat in the place of the cap at the discretion of the commanding officer of the post or command concerned, meets a demand long recognized by both medical and line officers and will, it is believed, go far toward increasing the personal comfort of troops serving under conditions where either intense heat or very wet weather is encountered.

Complaint is still made with reference to the use of the legging in garrison. It is undoubtedly both inconvenient and uncomfortable in the Tropics. And where the dissipation of the body heat is such an important factor in making for personal comfort it would seem worth while to adapt clothing to the conditions to be met.

SANITATION AT CAMPS IN TEXAS AND ON THE SOUTHERN BORDER.

The Second Division still remains in the camp which was established February 27, 1913. The Fifth Brigade, in May, 1914, formed a greater portion of the expeditionary force going to Mexico.

The general health of the Second Division remains very good. The venereal rate is higher than the average for troops in the United States and is probably largely the result of local conditions near the camp. Sanitary measures which have been customary in our service are in force, and it was commented on in this report last year that a water-carriage sewage system had been established in that portion of the Second Division camp near Texas City.

Other troops, notably the Ninth and Seventeenth Infantry, have been in camp at different points on the border, as were also Cavalry commands, and the Eleventh Cavalry in Colorado during the trouble with strikers. The general health conditions in these various camps have been entirely satisfactory, though the conditions under which the troops live were not always either pleasant or comfortable.

UNITED STATES MILITARY ACADEMY, WEST POINT, N. Y.

The surgeon at West Point reports that the health conditions in the main have been very satisfactory. The following table shows the hospital admission rates per thousand and the noneffective rates for hospital and quarters cases for the past nine years:

Year.	Mean annual strength command.	Admissions.		Noneffective (rates per 1,000).		
		Cases.	Rate per 1,000.	Hospital.	Quarters.	Hospital and quarters.
1906–7	440	682	15.50	35.22	19.31	54.52
1907–8	404	641	15.86	32.17	31.18	63.36
1908–9	422	992	23.50	32.77	27.01	59.71
1909–10	417	987	23.66	35.73	21.58	57.31
1910–11	407	780	19.16	28.25	8.10	36.60
1911–12	531	764	14.38	17.70	5.20	23.14
1912–13	515	587	11.39	16.89	3.90	20.97
1913–14	562	612	10.88	11.92	4.45	16.54
1914–15	612	690	11.27	19.83	8.40	28.22

The number of football injuries requiring hospital treatment occurring among cadets on the football squad was slightly larger than last year, 36 as compared with 28, and the total number of days lost in treatment in hospital was 221 as compared with 157. It is, however, gratifying to note that the serious injuries were conspicuously absent and no case of permanent disability has resulted from any injury incurred during the season. Synovitis of the knee is perhaps the most serious of the common football injuries, as it is frequently the result of a displaced cartilage which in turn often causes numerous recurrent attacks of synovitis. No injury of this nature occurred as the result of football. The very considerable increase in the number of days lost by treatment in hospital of football injuries was mainly due to three minor fractures, requiring in the aggregate 101 days' treatment. All of them made perfect recoveries. The following table shows the number of football injuries during the past eight seasons and the number of days lost by treatment in hospital:

Year.	Cases.	Days lost in hospital.	Average days per case.
1907	25	117	4.6
1908	62	362	5.8
1909	34	174	5.0
1910	27	210	7.7
1911	34	169	4.9
1912	35	259	7.4
1913	28	157	5.6
1914	36	221	6.1

Upon the recommendation of this office, the War Department has increased the requirements in regard to the teeth of applicants for entrance to the Military Academy, so that now candidates must have at least 12 of the 20 double teeth in serviceable condition, while teeth containing large cavities or exposed nerves constitute cause for rejection. It is believed that strict adherence to these requirements will have a most beneficial effect by making certain that cadets begin their course with mouths in proper condition. Heretofore much valuable time has been sacrificed, both of fourth class men and of dental surgeons, in the treatment of conditions which should have been remedied before admission.

The present cadet shoe has proved to be very satisfactory and has not caused serious disability in any case where the foot has been properly fitted.

SANITATION.

The general sanitary conditions at this station are excellent. The drainage area from which the water supply is obtained has been reported by experts as superior to the average in the State as regards freedom from danger of pollution and the filtration system in operation at the post insures water free from contamination under ordinary conditions.

HOSPITAL BUILDINGS.

The greatest need of the medical department at this station is a new cadet hospital. The present building dates from 1875 and is inadequate in size and general arrangement to the needs of the academy. It lacks facilities for the hospital treatment of officers and of women and children; for the open-air treatment of bed cases and for treatment of cases requiring isolation; the surgical operating department is inadequate; the squad room for the hospital corps is unsuitable, and there are no reading or recreation rooms for the detachment. As soon as funds are made available, sketch plans of a modern hospital will be drawn, and it is hoped that every effort will be made to secure an appropriation for its construction.

ALASKA.

The mean strength of the troops, officers and enlisted men, serving in Alaska during the past year was 958, as compared with 1,201, in 1913. This force consisted of Infantry, Signal Corps, and Hospital Corps, all white. Alaska still remains the healthiest region in which the Army is stationed. The noneffective, admission, and discharge rates were all lower in 1914 than in 1913. The noneffective rate was reduced over 22 per cent.

The admission rate for all causes was 408.14 per 1,000 in 1914, as compared with 486.26 in 1913. The rate for disease was 303.76 per 1,000, and that for external causes 104.38. The corresponding rates for the United States were, for total causes, 622.28 per 1,000, that for disease being 493.90, and that for external causes 128.38. The diseases having the highest admission rates are shown in the following tabulation:

Admission rates for some of the principal diseases for Alaska, American troops, officers and enlisted men.

	Admission rates.			
	Total officers and enlisted men.		Enlisted men.	
	1914	1913	1914	1913
Tonsillitis	29.23	16.65	30.60	16.65
Influenza	24.01	36.64	24.04	36.81
Venereal diseases	20.88	24.15	21.86	25.42
Bronchitis	19.83	26.64	20.77	27.17
Alcoholism (all)	16.70	20.81	17.49	21.91
Appendicitis	12.53	10.82	13.11	11.39
Rheumatism, muscular	10.44	23.31	10.93	22.79
Mental alienation	9.39	5.00	10.93	5.26
Diarrhea and enteritis	7.31	10.82	7.65	11.39
Rheumatism, articular (all)	4.18	9.99	4.37	10.51
Constipation	4.18	2.50	4.37	2.63
Gastritis, acute and chronic	3.13	19.98	3.28	21.03
Mumps	2.09	1.67	2.19	1.75
Synovitis	2.09	1.67	2.19	1.75
Malarial fevers	2.09	1.67	2.19	1.75
Tuberculosis (all)	1.04	2.50	1.09	1.75
Pneumonia	.....	2.50	.....	2.63
All causes	408.14	486.26	422.96	495.18

The noneffective rate was 10.17 per 1,000 in 1914, as compared with 13.24 in 1913. The rate for disease was 7.55 and for external causes 2.62 per 1,000. The diseases causing the highest noneffective rates are shown below:

Noneffective rates for some of the principal diseases for Alaska, American troops, officers and enlisted men.

	Noneffective rates.			
	Total officers and enlisted men.		Enlisted men.	
	1914	1913	1914	1913
Mental alienation	0.98	0.90	1.03	0.95
Appendicitis	.63	.80	.66	.84
Tonsillitis	.43	.22	.45	.23
Influenza	.33	.41	.32	.42
Tuberculosis (all)	.33	.56	.34	.53
Bronchitis	.29	.45	.31	.47
Venereal diseases	.29	.72	.31	.76
Alcoholism (all)	.19	.14	.20	.15
Rheumatism, muscular	.10	.34	.10	.35
Mumps	.10	.08	.10	.09
Diarrhea and enteritis	.06	.08	.06	.09
Rheumatism, articular (all)	.06	.51	.06	.54
Constipation	.06	.02	.06	.02
Synovitis	.04	.01	.04	.01
Malarial fevers	.04	.03	.04	.03
Gastritis, acute and chronic	.01	.25	.01	.26
Pneumonia	.....	.12	.....	.12
All causes	10.17	13.24	10.52	13.62

The death rate in 1914 was 8.74 per 1,000, and in 1913 was 5. In actual numbers 3 deaths occurred from disease and 5 from external cause.

Tables Nos. 3 and 76 give general figures for all enlisted men as compared with those serving in other countries, and Table No. 73 for all officers and enlisted men, together with proportionate figures for diseases and injury.

TABLE No. 27½.—*Influence of station, year 1914, Alaska, on officers and enlisted men.*

	Mean strength.	Ratio per 1,000 of mean strength.												Average number of days lost.			
		Admission to sick report.		Discharge on certificates of disability.		Deaths.		Total losses.		Noneffective rate.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
										From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.					
		From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	From all causes.	Excluding injuries, venereal diseases, alcoholism, and vaccinia.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
Fort William H. Seward	273	615.38	454.21	15.38	15.38	10.99	7.33	26.37	22.71	12.48	11.86	10.05	9.57	4.56	7.40	3.67	8.07
Fort Davis	115	408.70	286.96	.....	.....	.....	.....	.....	.....	8.43	7.22	6.74	6.38	3.08	7.33	2.46	8.58
Fort Gibbon	249	393.57	204.82	.....	.....	12.05	4.02	12.05	4.02	14.07	11.51	8.38	6.88	5.14	13.05	3.06	14.94
Fort Liscum	134	328.36	201.49	31.75	23.81	.....	.....	31.75	23.81	8.01	7.93	5.60	5.60	2.93	8.91	2.04	10.15
Fort St. Michael	105	266.67	142.86	.....	.....	.....	.....	.....	.....	6.58	6.39	3.42	3.31	2.40	9.00	1.25	8.73
Valdez	28	178.57	142.86	.....	.....	7.14	.....	7.14	.....	1.76	.....	1.57	.....	.64	3.60	.57	4.00
Fairbanks	54	18.52	.....	.....	.....	.....	.....	.....	.....	.86	.66	.....	.....	.31	17.00	.....	.....
Total officers and enlisted men	958	408.14	265.14	8.74	7.65	8.35	3.13	17.09	10.78	10.17	9.09	7.06	6.43	3.71	9.09	2.58	9.71
Total enlisted men	915	422.95	274.32	8.74	7.65	8.74	3.28	17.48	10.93	10.52	9.51	7.27	6.73	3.84	9.08	2.65	9.68

PHILIPPINE ISLANDS.

AMERICAN TROOPS.

No marked improvement in the health of the American troops stationed in the Philippines is shown for the year 1914, as compared with 1913. The high rate for venereal diseases, especially syphilis, which increased 31 per cent over the number of cases for 1913, is a matter of concern. On the other hand malarial diseases are less prevalent. Last year the greater amount of field service was stated as responsible for the increase, but it is understood that the American troops have not seen so much field duty during 1914. The rate appears capable of further reduction.

The mean strength of the enlisted American troops stationed in the Philippine Islands for the year was 10,253 (S. G. O.). Of this number 8,375 were white and 1,878 were colored. In addition there were the Philippine Scouts with a mean strength of 5,020 (S. G. O.), for whom the medical statistics will be given separately.

ADMISSION RATES.

During the year there were 8,999 case admissions for all causes, white and colored troops, and with a mean strength of 10,253, making a case-admission rate of 877.69, as compared with the corresponding rate of 922.06 for 1913, 1,246.99 for 1912, and 1,132 for 1911. The case-admission rate for disease was 746.61 for 1914, 776.28 for 1913, 1,075.34 for 1912, and 947 for 1911. The case-admission rate for white troops for all causes was 900.54 per 1,000, as compared with 775.83 for colored troops. The case-admission rate for injuries was 131.08, which is lower than it has been for some years.

CONSTANTLY NONEFFECTIVE RATES.

The total constantly noneffective rate for the year was 30.58; that for the white troops being 31.57, and for colored 26.21.

The total noneffective rate for disease in 1914 was 26.60 per 1,000, as compared with the corresponding rate of 26.84 for 1913 and 39.85 for 1912.

DISCHARGE ON CERTIFICATE OF DISABILITY.

The American soldiers are very rarely discharged in the Philippines, the cases being invalided home and discharged in the United States, but these are, however, credited to the Philippines. These are the cases shown in Table No. 28. The discharge rate for 1914 was 10.62, as compared with the corresponding rate of 14.14 per 1,000 for 1913. The rate for disease was 10.24 per 1,000, and that for injury 0.38, as compared with the corresponding rates of 13.44 and 0.70 in 1913. The total rate for the white troops was 11.30 and that for colored was 7.45.

The diseases causing the highest number of discharges were:

Disease.	Absolute numbers.	Rate per 1,000.
Mental alienation	37	3.51
Tuberculosis (all)	36	3.41
Venereal diseases	8	.76

The corresponding rate for mental alienation in the United States was 3.02 per 1,000, being lower than the rate in the Philippines.

TABLE NO. 28.—*Discharges for disability, American troops in the Philippine Islands, year 1914.*

Cause of discharge.	Number discharged.	Percentage of discharges for disability for disease.	Discharged for disability.				
			Not in line of duty.			Discharged for disability before assignment.	
			In line of duty.	Contracted before enlistment.	Contracted after enlistment.	In line of duty.	Not in line of duty.
DISEASES.							
Diseases of the nervous system and organs of special sense	50	46.30	4	46	.....	.....	.....
Mental alienation	37	34.26	2	35	.....	.....	.....
Dementia precox	23	21.30	2	21	.....	.....	.....
Imperfect mental development	13	12.04	.....	13	.....	.....	.....
Psychasthenia	1	.93	.....	1	.....	.....	.....
Epilepsy	3	2.78	.....	3	.....	.....	.....
Hysteria	3	2.78	.....	3	.....	.....	.....
Neurasthenia	3	2.78	1	2	.....	.....	.....
Trachoma	2	1.85	.....	2	.....	.....	.....
Amblyopia	1	.93	.....	1	.....	.....	.....
Otitis media, chronic	1	.93	1	.....	.....	.....	.....
General diseases	45	41.67	21	19	5	.....	.....
Tuberculosis	36	33.33	21	15	.....	.....	.....
Of the lungs	34	31.48	21	13	.....	.....	.....
Of the bones	1	.93	.....	1	.....	.....	.....
Other organs	1	.93	.....	1	.....	.....	.....
Venereal diseases	8	7.41	.....	4	4	.....	.....
Syphilis	5	4.63	.....	4	1	.....	.....
Tertiary	4	3.70	.....	3	1	.....	.....
Hereditary	1	.93	.....	1	.....	.....	.....
Gonorrhea	3	2.78	.....	.....	3	.....	.....
Cystitis	2	1.85	.....	.....	2	.....	.....
Arthritis	1	.93	.....	.....	1	.....	.....
Alcoholism, chronic	1	.93	.....	.....	1	.....	.....
Diseases of the digestive system	4	3.70	3	1	.....	.....	.....
Colitis, chronic	2	1.85	2	.....	.....	.....	.....
Pyorrhea alveolaris	1	.93	.....	1	.....	.....	.....
Sprue	1	.93	1	.....	.....	.....	.....
Diseases of the respiratory system	3	2.78	2	1	.....	.....	.....
Pleurisy, chronic fibrinous	2	1.85	1	1	.....	.....	.....
Bronchitis, chronic	1	.83	1	.....	.....	.....	.....
Diseases of the bones and organs of locomotion	3	2.78	.....	3	.....	.....	.....
Flat feet	2	1.85	.....	2	.....	.....	.....
Arthritis, chronic	1	.93	.....	1	.....	.....	.....
Diseases of the circulatory system	2	1.85	.....	2	.....	.....	.....
Cardiac neurosis	1	.93	.....	1	.....	.....	.....
Arteriosclerosis	1	.93	.....	1	.....	.....	.....
Diseases of the urinary system	1	.93	1	.....	.....	.....	.....
Papilloma of bladder	1	.93	1	.....	.....	.....	.....
Total for disease	108	100.00	34	69	5	.....	.....
EXTERNAL CAUSES.							
Fractures	2	50.00	2	.....	.....	.....	.....
Incised wound	1	25.00	.....	.....	1	.....	.....
Injury prior to enlistment	1	25.00	.....	1	.....	.....	.....
Total for external causes	4	100.00	2	1	1	.....	.....
Total for diseases	108	96.43	34	69	5	.....	.....
Total for external causes	4	3.57	2	1	1	.....	.....
Grand total	112	100.00	36	70	6	.....	.....

DEATHS.

Deaths occurring in the United States in persons invalided home from the Philippines are credited to the Philippine Islands. There were 41 deaths in 1914, 22 from disease and 19 from external causes, the total rate being 3.64 per 1,000—that for disease 1.95, and for injuries 1.69. These figures are taken from Table No. 29 and are for officers and enlisted men. The figures are slightly different from those given in Table No. 72 in the back of the report, which are for enlisted men only and show only 40 deaths. The corresponding rates for 1913, officers and enlisted men, were: Total, 4.87 per 1,000; diseases, 2.48; and injuries, 2.39 per 1,000. There were 4 deaths from drowning in 1914 and 3 in 1913; 2 from suicide in 1914 and 3 in 1913; 4 from homicide in 1914 and 2 in 1913. There were no officers or enlisted men, American troops, killed in action in 1914.

Tuberculosis caused 4 deaths in 1914 and 9 in 1913; malaria, no deaths in 1914 and 2 in 1913; dysentery, 1 in 1914 and 6 in 1913; organic disease of the heart, 1 in 1914 and 2 in 1913.

TABLE No. 29.—*Causes of death, American troops, Philippine Islands, year 1914, officer and enlisted men.*

Cause of death.	Number of deaths.	Ratio per 1,000 of—	
		Mean strength.	Deaths from disease.
DISEASE.			
Tuberculosis	4	0.36	181.82
Of the lungs	2	.18	90.91
Miliary	1	.09	45.45
Meningitis	1	.09	45.45
Appendicitis	3	.27	136.36
Cancer	2	.18	90.91
Alcoholism (acute, 1; delirium tremens, 1)	2	.18	90.91
Aneurism	2	.18	90.91
Dysentery, entamoebic	1	.09	45.45
Septicemia	1	.09	45.45
Rabies	1	.09	45.45
Syphilis, tertiary	1	.09	45.45
Abscess of the brain	1	.09	45.45
Epidemic cerebrospinal meningitis	1	.09	45.45
Endocarditis, chronic	1	.09	45.45
Arteriosclerosis	1	.09	45.45
Abscess of the liver	1	.09	45.45
Total	22	1.95	1,000.00
EXTERNAL CAUSES.			
Suicidal (both by service rifles)	2	.18	105.26
Homicidal	4	.36	210.53
Cutting instruments (dagger, 2, by civilians' razor, 1, by comrade)	3	.27	157.89
Unknown (found dead with skull crushed)	1	.09	52.63
Accidental	13	1.15	684.21
Drowning (while fording river with pack mules, 1; while swimming, 2; capsizing of boat, 1)	4	.36	210.53
Acute poisonings (anæsthesia during surgical operation, 1; methyl alcohol, 1; narcotic drug, unknown, 1)	3	.27	157.89
Gunshot wounds (both by revolvers)	2	.18	105.26
Poisoning by food	2	.18	105.26
Fall from steps of house, fracturing skull	1	.09	52.63
Punctured wound from thorn, infected	1	.09	52.63
Total	19	1.69	1,000.00
Total for disease	22	1.95	536.59
Total for external causes	19	1.69	463.41
Grand total	41	3.64	1,000.00

PREVALENCE OF SPECIAL DISEASES, AMERICAN TROOPS (ENLISTED MEN).

TYPHOID FEVER.

None occurred in 1914 and in 1913.

The admission rate per 1,000 was 0.40 in 1912, 0.88 in 1911, and 2.53 in 1910.

MALARIAL FEVERS.

The admission rate for all fevers of this class was 45.26, as compared with 112.08 for 1913, 171 for 1912, 75.56 for 1911, 86.34 for 1910, 112.35 for 1909, 123.97 for 1908, and 167.79 for 1907. The rates for American and native troops are shown graphically in charts X and Y.

The post having the highest admission rate for American garrisons was Camp Stotsenburg, Luzon, with a rate of 81.12; Camp Eldridge was second with a rate of 75.47.

Table No. 31 shows the relative standing of certain posts. It is to be noted that garrisons of natives had considerably higher rates for malaria than the American garrisons.

TABLE No. 31.—*Malarial fevers, year 1914, compared with year 1913, for stations in the Philippine Islands.*

Posts.	Ratio per 1,000 of mean strength.	
	1914	1913
Principally of American troops:		
Camp Stotsenburg	81.12	120.99
Camp Eldridge	75.47	143.15
Cuartel de Espana	72.84	96.89
Regan Barracks	39.77	31.82
Camp John Hay	37.27	34.48
Fort William McKinley	33.28	68.23
Fort Mills	31.75	44.18
Camp Ward Cheney	20.55	149.48
Camp McGrath	16.97	19.05
Fort Santiago and Headquarters, Philippine Department	15.62	29.41
Principally of Philippine Scouts:		
Ludlow Barracks	778.49	399.04
Camp Gregg	247.01	139.19
Fort San Pedro	183.95	114.50
Augur Barracks	178.90	514.90
Warwick Barracks	152.50	321.59
Pettit Barracks	150.48	309.68
Camp Connell	143.79	147.14
Camp Overton	75.47	322.03
Camp Keithley	62.62	123.89

UNDETERMINED FEVERS.

The admission rate for these fevers was 4.39 per 1,000, as compared with 5.27 for 1913, 15.46 for 1912, and 6.74 for 1911. The various diagnoses under this head are as follows:

Febricula	24
Fevers, simple, continued	1
Fever, type undetermined	43
Total	68

SMALLPOX.

No cases occurred in 1914 and 1913.

VENEREAL DISEASES.

Venereal diseases still hold first place for both admission and noneffective rate. About one-fourth of the total number of admissions for disease were due to venereal diseases. There were 851 admissions for gonorrhea, 565 for chancroid, and 487 for syphilis. More than one-third of the total noneffective rate for disease was due to venereal diseases.

Venereal diseases, Philippine Islands (enlisted men).

	Syphilis.	Chancroid.	Gonorrhea.	Total venereal.
White troops:				
1914	47.28	47.40	80.11	174.79
1913	32.31	24.74	83.71	140.77
Colored troops:				
1914	48.46	89.46	95.85	233.76
1913	37.55	51.90	104.92	194.37
All American troops (enlisted):				
1914	47.49	55.10	83.00	185.60
1913	33.16	29.14	87.14	149.45

TABLE NO. 32.—*Venereal diseases among officers and enlisted men at posts in the Philippines having strength of more than 300 men, year 1914.*

Posts.	Admissions.		Mean strength.
	Total.	Ratios.	
PRINCIPALLY AMERICAN TROOPS.			
Camp McGrath	261	340.73	766
Fort William McKinley	598	226.17	2,644
Regan Barracks	70	198.86	352
Cuartel de Espana	107	162.37	659
Camp Stotsenburg	250	151.33	1,652
Camp Eldridge	49	115.57	424
Fort Mills	313	94.65	3,307
Camp John Hay	15	46.58	322
PRINCIPALLY PHILIPPINE SCOUTS.			
Augur Barracks	68	90.78	749
Camp Connell	24	78.43	306
Warwick Barracks	19	47.50	400
Ludlow Barracks	29	46.55	623
Camp Keithley	15	27.62	543
Pettit Barracks	7	16.99	412

ALCOHOLISM AND ITS RESULTS.

The admission rate, 22.14, was higher than for 1913, 20.38. The noneffective rate was 0.34, the same as in 1913, and was 0.35 per 1,000 in 1912. In 1914 the rates for white troops were 25.67 and 0.39. Those for colored troops were 6.39 and 0.14.

CHOLERA.

No cases occurred.

TUBERCULOSIS.

There were 75 cases among the American troops, a ratio of 7.31 per 1,000. These cases were all promptly transferred home; of the 3 deaths reported all occurred in cases transferred to the United States. In 1913 there were 75 cases, with a ratio of 6.70, and in 1912, 62 cases with a ratio of 5.02 per 1,000.

BERIBERI.

No cases occurred.

DYSENTERY.

The occurrence of this disease is less frequent than in 1913, being 12.97 per 1,000, as compared with 20.83 in 1913, 16.91 in 1912, and 14.37 in 1911. There were 108 cases of entamoebic dysentery with a rate of 10.53, 16 cases of bacillary with a rate of 1.56, and 9 unclassified with a rate of 0.88 per 1,000. The noneffective rate for all dysentery was 0.76 per 1,000 for 1914, and 1.24 for 1913.

DENGUE.

This disease had the fourth highest admission and the seventh highest noneffective rate. There were 340 cases with an admission rate of 33.16 per 1,000 and a noneffective rate of 0.55, as compared with 439 admissions in 1913 with an admission rate of 39.24 and a noneffective rate of 0.56. There was no death or discharge for disability resulting.

MENTAL ALIENATION.

The admission rate for mental alienation was 6.24 for American troops in the Philippine Islands. In the United States the rate was 3.83. Last year the rates were 4.83 for American troops in the Philippine Islands, and 2.92 in the United States.

DIARRHEA AND ENTERITIS.

The admission rate for these diseases is slightly lower than in 1913, being 63.10 per 1,000, as compared with 67.48 for 1913, 60.69 for 1912, and 46.09 for 1911. The noneffective rate was 0.91 per 1,000 in 1914, as compared with 1.14 in 1913, 1.05 in 1912, and 0.92 in 1911.

INVALIDING TO THE UNITED STATES.

The diseases causing the highest number of men to be invalided home were, with actual numbers: Tuberculosis, 77; mental alienation, 57; syphilis, 22; gonorrhea, 11; neurasthenia and fracture, 10 each; epilepsy, chronic alcoholism, and entamoebic dysentery, 8.

Chart W.

Admission, Discharge, Death and Noneffective rates for Diseases having the highest rates for Philippine Islands {American enlisted men} year, 1914.

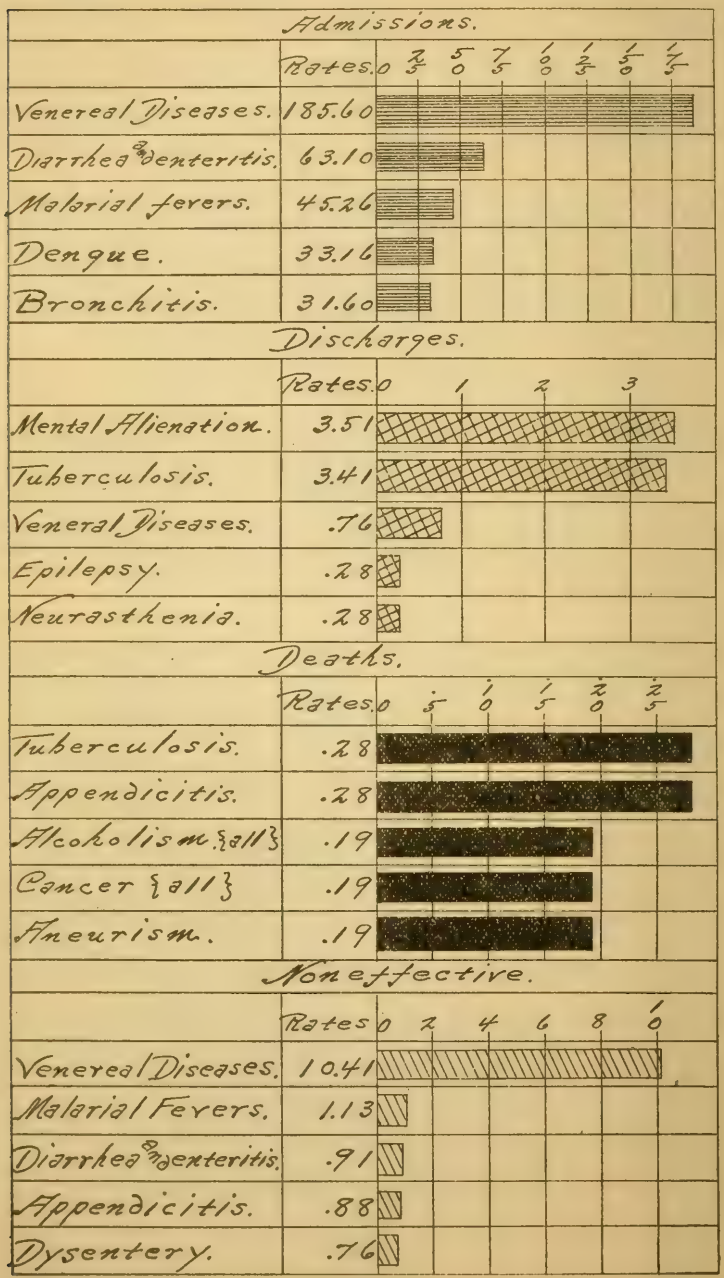
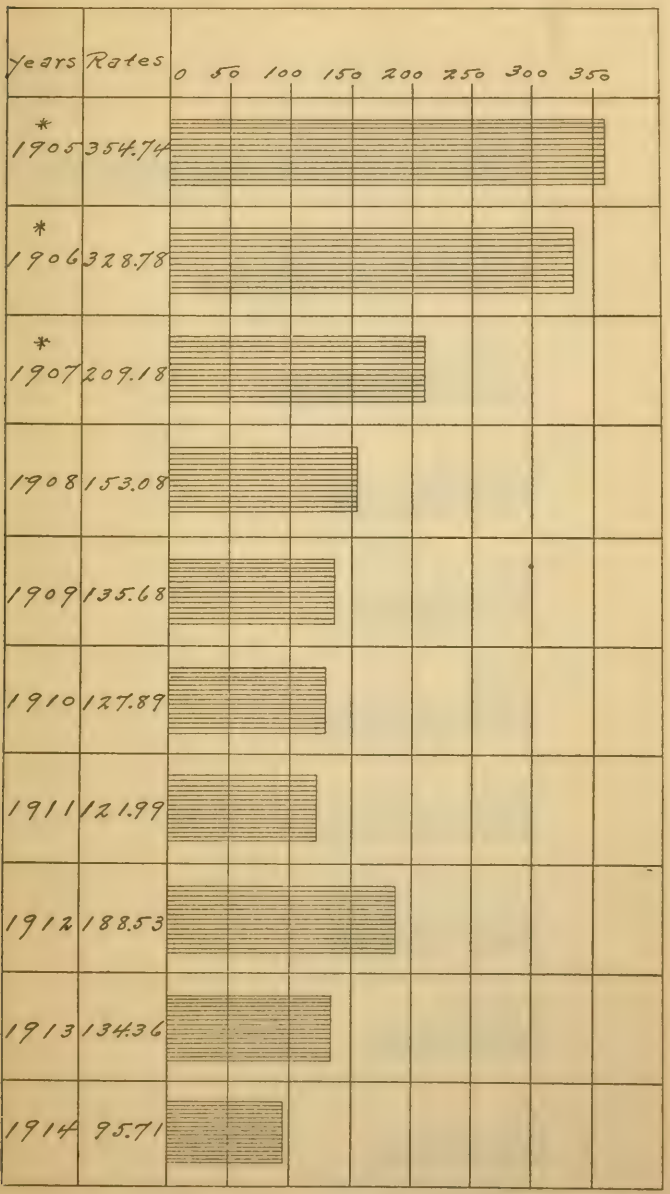


Chart X.

Malarial Fevers.

Admission Rates.

Admission rates for Malarial Fevers, Philippine Islands { Officers, 2nd American and Native enlisted men } years, 1905–1914.



* Enlisted men. Officers not included.

Chart Y

Malarial Fevers.
Admission Rates.
Comparison of Admission rates, Malarial Fevers, American enlisted men and Philippine Scouts, Philippine Islands, years, 1905-1914.

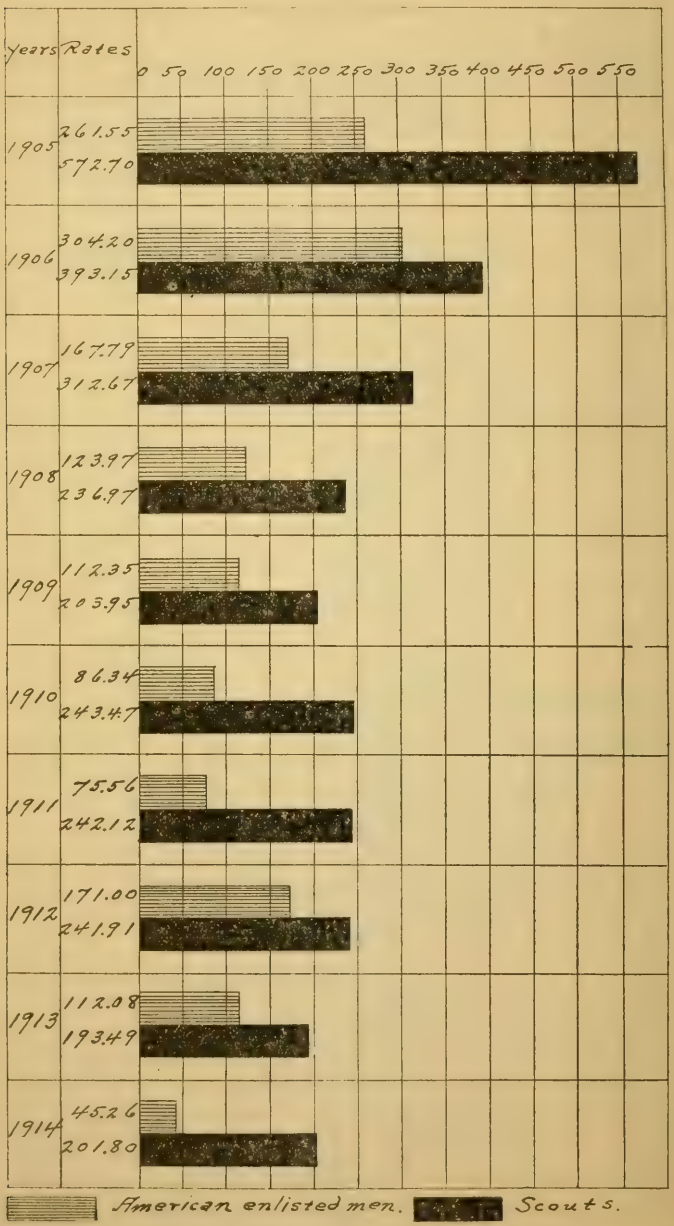


TABLE NO. 33.—*Enlisted men invalided home from the Philippine Islands, year 1914.*

Cause.	Number of cases.	Percentage of total cases.	Duty.	Discharged on certificates of disability.	Died.	Otherwise disposed of.	Remaining at end of year.
Tuberculosis (pulmonary, 74; of other organs, 3)	77	28.00	3	31	2	3	38
Mental alienation (defective mental development, 15; dementia precox, 41; other, 1)	57	20.73	2	41	.....	2	12
Syphilis	22	8.00	6	6	.....	6	4
Gonorrhea	11	4.00	3	4	.....	4	.....
Neurasthenia	10	3.64	3	6	.....	.....	1
Fracture, exclusive of gunshot	10	3.64	.....	5	.....	4	1
Chronic alcoholism	8	2.91	3	2	.....	2	1
Entamoebic dysentery	8	2.91	5	.....	.....	1	2
Epilepsy	8	2.91	.....	8	.....	.....	.....
Colitis	5	1.82	1	2	.....	1	1
Malarial cachexia	4	1.45	3	.....	.....	1	.....
Pleurisy	4	1.45	.....	2	.....	.....	2
Phancroid	3	1.09	2	.....	.....	1	.....
Sprue	3	1.09	2	.....	.....	.....	1
Cancer	3	1.09	.....	.....	2	1	.....
Chronic articular rheumatism	2	.73	.....	.....	.....	2	.....
Trachoma	2	.73	.....	2	.....	.....	.....
Amblyopia	2	.73	.....	2	.....	.....	.....
Valvular disease of the heart	2	.73	.....	2	.....	.....	.....
Appendicitis	2	.73	.....	1	.....	1	.....
Abscess of the liver	2	.73	1	.....	.....	1	.....
Arthritis	2	.73	1	1	.....	.....	.....
Flat foot	2	.73	.....	2	.....	.....	.....
Gunshot wound	2	.73	1	1	.....	.....	.....
Malarial fever	2	.73	1	.....	.....	1	.....
Hysteria	1	.36	.....	1	.....	.....	.....
Cardiac hypertrophy	1	.36	.....	.....	.....	1	.....
Cardiac neurosis	1	.36	.....	1	.....	.....	.....
Chronic myocarditis	1	.36	.....	.....	.....	1	.....
Aneurism	1	.36	.....	1	.....	.....	.....
Chronic bronchitis	1	.36	.....	.....	.....	.....	1
Pneumonia, lobar	1	.36	.....	.....	.....	1	.....
Pulmonary emphysema	1	.36	1	.....	.....	.....	.....
Cirrhosis of the liver	1	.36	.....	.....	.....	1	.....
Chronic hepatitis	1	.36	.....	.....	.....	1	.....
Enuresis	1	.36	.....	1	.....	.....	.....
Stricture of the urethra	1	.36	1	.....	.....	.....	.....
Cellulitis	1	.36	.....	.....	.....	1	.....
Necrosis	1	.36	.....	.....	.....	.....	1
Periostitis	1	.36	.....	.....	.....	.....	1
Muscular rheumatism	1	.36	1	.....	.....	.....	.....
Congenital malformation (deformed toe)	1	.36	1	.....	.....	.....	.....
Incised wound	1	.36	.....	1	.....	.....	.....
Sprain	1	.36	.....	.....	.....	1	.....
Muscular strain	1	.36	.....	1	.....	.....	.....
Lacerated wound	1	.36	.....	.....	.....	.....	1
Secondary results of injury (adhesions following gunshot wound)	1	.36	.....	1	.....	.....	.....
Total cases	275	.....	41	125	4	38	67
Percentage of total cases	.....	100.00	14.91	45.45	1.45	13.82	24.36

TABLE NO. 34.—*Posts in the Philippines having the highest admissions and noneffective rates per 1,000 of mean strength among all those having a total strength of over 200 officers and enlisted men, year 1914.*

Posts in order of highest admission rates from all causes.	Mean strength.	Ratio per 1,000 of mean strength.											Average number of days lost.			
		Admissions to sick report.		Discharged on certificate of disability.		Deaths.		Total losses.		Noneffective from sickness.				From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
		From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.		For each soldier.	For each case.	For each soldier.	For each case.
										Total.	In hospital.	Total.	In hospital.				
PRINCIPALLY AMERICAN TROOPS.																	
Fort William McKinley	2,644	1,065.43	694.02	13.00	10.64	4.16	1.89	17.16	12.53	32.99	31.59	18.33	17.38	12.04	11.30	6.69	9.64
Cuartel de Espana	659	1,027.32	732.93	19.20	19.20	1.52	.....	20.72	19.20	1.35	.02	.68	.02	.49	.48	.25	.34
Regan Barracks	352	951.70	573.86	5.92	5.92	8.52	5.68	14.44	11.60	35.21	34.36	18.72	18.13	12.85	13.50	6.83	11.90
Camp McGrath	766	899.48	403.39	4.02	4.02	1.31	.....	5.33	4.02	29.90	29.38	10.12	9.90	10.92	12.13	3.69	9.16
Camp Eldridge	424	884.43	587.26	9.80	9.80	9.43	4.72	19.23	14.52	40.59	38.28	23.45	22.80	14.82	16.75	8.56	14.57
Camp Stotsenburg	1,652	875.30	546.00	8.33	6.41	1.21	.61	9.54	7.02	25.15	24.15	11.31	10.71	9.18	10.49	4.13	7.56
Camp John Hay	322	711.18	416.15	3.24	3.24	.....	.....	3.24	3.24	39.66	31.23	26.96	19.27	14.48	20.36	9.84	23.65
Fort Mills	3,307	570.30	370.73	10.01	9.07	3.02	2.12	13.03	11.19	17.20	16.83	8.77	8.58	6.28	11.01	3.20	8.63
PRINCIPALLY PHILIPPINE SCOUTS.																	
Ludlow Barracks	623	1,367.58	1,178.17	4.98	4.98	6.42	4.82	11.40	9.80	27.16	26.02	22.04	21.21	9.91	7.25	8.05	6.83
Fort San Pedro	299	1,130.43	752.51	.....	.....	6.69	.....	6.69	.....	30.45	29.67	14.45	13.76	11.11	9.83	5.27	7.01
Augur Barracks	749	885.18	666.22	4.15	.....	6.68	2.67	10.83	2.67	23.75	23.24	14.41	13.99	8.67	9.79	5.26	7.89
Pettit Barracks	412	742.72	572.82	2.52	2.52	2.43	2.43	4.95	4.95	18.91	17.97	14.14	13.70	6.90	9.29	5.16	9.01
Warwick Barracks	400	645.00	497.50	.....	.....	2.50	2.50	2.50	2.50	16.90	16.53	11.79	11.58	6.17	9.56	4.30	8.65
Camp Kiethley	543	484.35	383.06	3.84	1.92	5.53	1.84	9.37	3.76	13.30	12.18	9.29	8.71	4.85	10.02	3.39	8.85
Camp Nichols	282	273.05	202.13	.....	.....	.....	.....	.....	.....	.95	.....	.76	.....	.35	1.27	.28	1.37

INFLUENCE OF SEASON.

Exclusive of injuries, venereal diseases, alcoholism, and vaccinia, which are not influenced by season, the highest admission rate occurred in July, and the highest noneffective rate was in August.

TABLE No. 35.—*Influence of season on troops in the Philippine Islands, year 1914, officers and enlisted men, including scouts.*

Months.	Mean strength.	Ratio per 1,000 of mean strength. All causes. Admissions. Total.	All causes. Admissions. Hospital.	All causes. Deaths.	All causes. Noneffective. Total.	All causes. Noneffective. Hospital.	Exclusive of venereal diseases, alcoholism, vaccinia, and injuries. Admissions.	Exclusive of venereal diseases, alcoholism, vaccinia, and injuries. Deaths.	Exclusive of venereal diseases, alcoholism, vaccinia, and injuries. Noneffective.	Prevailing diseases (exclusive of venereal diseases, etc.).
January	16,189	59.67	55.47	0.12	25.46	24.45	39.47	0.06	14.12	Malaria, 129; diarrhea and enteritis, 41; constipation, 38; dengue, 30.
February	15,580	50.71	45.89	.25	24.92	23.48	30.49	.06	13.39	Malaria, 92; diarrhea and enteritis, 47; constipation, 30.
March	15,743	74.41	71.01	.43	31.04	29.88	48.27	.25	16.64	Malaria, 154; diarrhea and enteritis, 49; constipation, 47; acute bronchitis, 32.
April	15,848	65.94	62.47	.19	29.12	27.76	43.60	....	16.12	Malaria, 133; diarrhea and enteritis, 58; dengue, 35; furuncles, 34; constipation, 31.
May	16,331	68.27	64.60	.31	27.03	25.63	42.80	.06	15.29	Malaria, 88; diarrhea and enteritis, 57; furuncles, 45; constipation, 42.
June	16,589	64.62	60.29	.50	24.66	23.29	44.37	.31	14.41	Malaria, 152; diarrhea and enteritis, 81; acute bronchitis, 31; furuncles, 30.
July	15,580	83.76	79.78	.38	29.66	28.25	59.18	.19	16.88	Malaria, 198; diarrhea and enteritis, 128; constipation, 47; furuncles, 44; dengue, 43.
August	15,280	76.57	72.19	.32	28.17	27.24	54.19	.32	17.15	Malaria 148; dengue, 78; diarrhea and enteritis, 55; furuncles, 51; constipation, 50.
September	16,374	64.61	61.13	.19	25.48	24.44	44.15	.06	15.01	Malaria,121; diarrhea and enteritis, 55; constipation, 44; dengue, 40; acute bronchitis, 39.
October	15,487	73.35	69.15	.46	28.47	27.08	50.17	.23	16.79	Malaria, 135; diarrhea and enteritis, 130; constipation, 48; acute bronchitis, 37.
November	15,689	68.46	64.32	.24	26.45	25.60	44.17	.12	14.73	Malaria, 80; diarrhea and enteritis, 65; acute bronchitis, 51; furuncles, 35.
December	16,631	68.49	64.82	.12	26.00	25.24	45.58	.06	15.05	Malaria, 96; acute bronchitis, 64; diarrhea and enteritis, 56; constipation, 50.
Total	15,943	818.04	770.31	3.50	27.20	26.03	545.76	1.78	15.47	Malaria, 1,522; diarrhea and enteritis, 822; constipation, 487; acute bronchitis, 427; furuncles, 397; dengue, 394.

The highest rate for malarial fevers was in July, and for dengue in August. The highest death rate occurred in June.

TABLE NO. 36.—*Influence of disease on enlisted American troops, by arms of service serving in the Philippine Islands, year 1914.*

Arms of service.	Mean strength.	Admitted.	Discharged on certificate of disability.	Died.	Constantly non-effective.	Ratio per 1,000 of mean strength.			
						Admitted.	Discharged on certificate of disability.	Died.	Constantly non-effective.
Infantry	4,891	3,636	42	11	140.92	743.41	8.35	2.19	28.89
Cavalry	1,787	1,470	22	2	49.48	822.61	11.96	1.09	22.09
Coast Artillery	1,364	902	23	4	26.81	661.29	16.38	2.85	19.66
Field Artillery	710	753	11	.....	24.64	1,060.56	15.05	.....	34.70
Engineers	263	133	2	.....	4.36	505.70	7.38	.....	16.58
Ordnance	73	28	.....	.....	1.48	383.56	.....	.....	20.27
Signal Corps	147	96	.....	.....	2.80	653.06	.....	.....	19.25
Hospital Corps	520	342	6	1	10.68	657.59	11.21	1.87	20.54
All others	498	295	2	3	11.62	592.37	3.90	5.85	23.33
Total	10,253	7,655	108	21	313.58	746.61	10.24	1.99	30.58

PHILIPPINE SCOUTS.

The health of the native troops in the Philippines for 1914 does not appear from the rates for disease to have been as good as for the year 1913. The mean strength of these troops during the year was 5,020.

ADMISSIONS.

During the year there were 3,585 admissions for all causes, giving a case admission rate of 714.14 per 1,000. The rate for diseases was 618.33 and that for injury 95.82 per 1,000. The admission rate for 1913 for all causes was 681.12, for disease 585.36, and for injuries 95.76 per 1,000. It is thus apparent that the admission rates for 1914 were higher than the corresponding rates in 1913. The following tabulation gives the admission rates for some of the principal diseases in 1913 and 1914:

	1913	1914
Malarial fevers	193.49	201.80
Venereal diseases	36.30	57.57
Diarrhea and enteritis	21.59	26.49
Bronchitis	38.66	24.50
Ankylostomiasis	4.51	16.53
Dysenteries	7.06	8.96
Tuberculosis (all)	6.28	6.57
Dengue	12.75	5.58

CONSTANTLY NONEFFECTIVE RATES.

The constantly noneffective rate for 1914 was 20.30 per 1,000, as compared with 18.31 in 1913. The rate for disease was 17.48 per 1,000 in 1914 and 14.81 in 1913, while that of injuries was 2.82 in 1914 and 3.49 per 1,000 in 1913. The following tabulation shows noneffective rates of the principal diseases in 1913 and 1914:

	1913	1914
Venereal diseases	1.92	3.66
Malarial fevers	3.28	3.48
Tuberculosis (all)	.85	.82
Acute abscess and cellulitis	.58	.79
Furuncle and carbuncle	.54	.62
Bronchitis	1.03	.60
Ankylostomiasis	.08	.46
Mumps	.36	.41
Dysenteries	.30	.39
Diarrhea and enteritis	.26	.30
Rheumatism, articular	.22	.23

From the comparisons afforded by these tabulations it is evident that venereal disease shows the most alarming increase. This rate has been heretofore but a fraction of that for American troops in the Philippines, and it would be most disastrous to the efficiency of the native forces were they to develop the high rate for venereal disease prevalent among American troops. The present rate is equal to the

mean for the last 10 years. The reappearance of beriberi and the increase of hookworm disease to 83 from 23 cases is also a matter of concern.

TABLE NO. 37.—*Movement of sick, Philippine Scouts, enlisted men, year 1914.*

	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
	Total.	In hospital.	Total.	In hospital.
Ratio per 1,000 of mean strength:				
Admissions to sick report	714.14	693.23	557.57	.....
Discharges on certificate of disability	9.56	.....	8.76	.....
Deaths	3.19	.....	1.99	.....
Total losses	12.75	.....	10.75	.....
Noneffective	20.30	19.89	13.77	13.54
Average number of days lost:				
For each soldier	7.41	7.26	5.03	4.94
For each case	10.37	10.47	9.01	.....

DISCHARGE FOR DISABILITY.

In 1914 there were 48 discharges, the same number as in 1913, on certificates of disability with a rate of 9.56. Tuberculosis caused 26 discharges in 1914 and 37 in 1913; venereal diseases, none in 1914 and 1913; mental alienation, 10 in 1914, 1 in 1913; and external causes, 4 in 1914 and 3 in 1913.

TABLE NO. 38.—*Causes of discharge for disability, Philippine Scouts, year 1914.*

Causes of discharge.	Number discharged.	Percentage of discharges for disease.	In line of duty.	Not in line of duty.	
				Contracted before enlistment.	Contracted after enlistment.
DISEASES.					
General diseases	30	68.18	29	1	.....
Tuberculosis	26	59.09	25	1	.....
Of the lungs	22	50.00	21	1	.....
Of the joints	2	4.55	2	.....	.....
Abdominal	1	2.27	1	.....	.....
Of the lymph glands	1	2.27	1	.....	.....
Leprosy	4	9.09	4	.....	.....
Diseases of the nervous system and organs of special sense	13	29.55	2	11	.....
Defective mental development	9	20.45	.....	9	.....
Dementia precox	1	2.27	.....	1	.....
Chronic multiple neuritis	1	2.27	1	.....	.....
Disease of the eyes (amblyopia, 1; optic atrophy, 1)	2	4.55	1	1	.....
Diseases of the bones and joints	1	2.27	1	.....	.....
Arthritis, chronic	1	2.27	1	.....	.....
Total for diseases	44	100.00	32	12	.....
EXTERNAL CAUSES.					
Gunshot wounds (rifle, 2; unknown, 2)	4	100.00	3	.....	1
In action	3	75.00	3	.....	.....
While cleaning rifle	1	25.00	.....	.....	1
Total for external causes	4	100.00	3	.....	1
Total for diseases	44	91.67	32	12	.....
Total for external causes	4	8.33	3	.....	1
Grand total	48	100.00	35	12	1

DEATHS.

There were 16 deaths, with a rate of 3.19 per 1,000, in 1914, and 48, with a rate of 9.17, in 1913. There were 4 deaths from tuberculosis in 1914 and 1 in 1913; 1 from typhus fever in 1914 and none in 1913; 5 from external causes in 1914 and 34 in 1913. There were none killed in action in 1914, 32 in 1913; there were 2 deaths from homicide and 1 from suicide.

TABLE NO. 39.—*Causes of death among Philippine scouts, year 1914.*

Causes of death.	Number of deaths.	Ratio per 1,000 of—	
		Mean strength.	Total deaths.
DISEASES.			
Tuberculosis	4	0.80	363.64
Of the lungs	2	.40	181.82
Of the bladder	1	.20	90.91
Miliary	1	.20	90.91
Dysentery, entamoebic	2	.40	181.82
Intestinal obstruction	2	.40	181.82
Typhus fever	1	.20	90.91
Gonorrheal endocarditis	1	.20	90.91
Simple meningitis	1	.20	90.91
Total	11	2.19	1,000.00
EXTERNAL CAUSES.			
Suicidal (revolver)	1	.20	200.00
Homicidal	2	.40	400.00
By rifle (comrade)	1	.20	200.00
By barong (civilian)	1	.20	200.00
Accidental	2	.40	400.00
Ptomaine poisoning	1	.20	200.00
Poisoning by bichloride of mercury	1	.20	200.00
Total	5	1.00	1,000.00
Total for disease	11	2.19	687.50
Total external causes	5	1.00	312.50
Grand total	16	3.19	1,000.00

SPECIAL DISEASES.

TYPHOID FEVER.

No cases of this disease occurred during 1914 and 1913.

MALARIAL FEVERS.

The admission rate for all fevers of this class was 201.80, as compared with 193.49 in 1913. Social conditions under which the native troops live have hitherto acted to produce few cases of venereal disease and many cases of malaria. Many of these soldiers having wives, they spend much time in native houses, which makes them liable to malaria, omnipresent among the Filipinos. Chart Y, page 98, shows graphically the prevalence of malaria for the decade 1905–1914. It was hoped that with fewer demands for strenuous service in the field the rate would have been a marked improvement over that for any previous year.

VENEREAL DISEASES.

These diseases constitute the second cause of admission among these troops. The admission rate was 57.57 per 1,000, as compared with 36.30 for 1913. There were 210 admissions for gonorrhea, 34 for chancroid, and 45 for syphilis in 1914, as compared with 150, 17, and 18, respectively, in 1913. These diseases caused about one-twelfth of the total number of admissions for disease, while among the American troops in the Philippines they caused over one-fourth the total. The noneffective rate was 3.66 per 1,000, as compared with 1.92 per 1,000 for 1913. This marked deterioration would appear to have been due to a failure to carry out prophylaxis, as it is unlikely that the percentage of married soldiers has markedly altered in spite of the fact that a larger number of recruits than usual joined the colors during the year. The increase in the rate of venereal disease is about 60 per cent.

SMALLPOX.

There were 7 cases of this disease with no deaths or discharges In 1913 there were 7 cases with 1 death.

CHOLERA.

Two cases of this disease occurred during the year. Both cases recovered.

TUBERCULOSIS.

There were 33 cases of this disease, the admission rate being 6.57 per 1,000. There were 4 deaths and 26 discharges.

DYSENTERIES.

There were 45 cases, 38 of them being entamoebic, the admission rate being 8.96, as compared with 7.06 for 1913 and 7.03 for 1912 There were 2 deaths from this cause.

DENGUE.

There were 28 cases, the admission rate being 5.58, as compared with 12.75 per 1,000 for 1913.

DIARRHEA AND ENTERITIS.

The admission rate was 26.49, as compared with 21.59 for 1913.

ALCOHOLISM AND RESULTS.

There were 3 cases, the admission rate being 0.60.

BERIBERI.

There were 2 cases in 1914 and none in 1913.

UNDETERMINED FEVERS.

There were 19 cases in 1914.

The admission rate for febricula and undetermined fevers was 3.78 in 1914 and 6.48 per 1,000 in 1913.

Fourteen cases were the victims of poisonous bites or stings.

SURGICAL OPERATIONS.

TABLE No. 40.—*Surgical operations performed on Philippine Scouts, 1914.*

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	EYE.										
Incision and drainage	Dacryocystitis	1	1							1	
	EAR.										
Incision and drainage of integument over mastoid.	Mastoiditis	1	1							1	
Paracentesis	Otitis media	2	2								2
Incision	Abscess acute, external auditory canal.	1	1								1
	NOSE.										
Rhinoplasty, in 3 stages	Total destruction of nose, following gunshot wound of face.	3	3					3			
Excision	Polypi, both nasal orifices	2	2							2	
	THORAX.										
Paracentesis	Pleurisy	4	4							2	2
Do	Hemothorax, traumatic	1	1							1	
	ABDOMEN.										
Thoracic route, resection eleventh rib.	Abscess of liver	1	1					1			
Appendectomy	Appendicitis	3	3					3			
Bassini's operation	Inguinal hernia	3	3					3			
Laparotomy, exploratory	Psoas abscess	1	1					1			
Do	Pain in epigastric region	1	1					1			
	ANUS AND RECTUM.										
Incision curetment and drainage.	Fistula in ano	2	2					1		1	
Excision, 1; ligation and excision, 2; clamp and cautery, 1.	Hemorrhoids	4	4					1		3	

TABLE No. 40.—*Surgical operations performed on Philippine Scouts, 1914*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Local.	None.
	GENITO-URINARY SYSTEM.										
Orchidectomy, with excision of spermatic cord.	Tuberculosis of epididymis	1	1					1			
High excision of veins	Varicocele	1	1					1			
Tapping, 1; eversion of tunic, 1.	Hydrocele	2	2					1		1	
Incision and drainage	Peri-urethral abscess	1	1							1	
Meatotomy	Hypospadias	1	1							1	
Do	Congenital stenosis	1	1							1	
Circumcision	Incised wound, self-inflicted	1	1							1	
Do	Chancroids on prepuce	1	1							1	
Do	Phimosis	34	34					2		32	
Do	Redundant prepuce	1	1							1	
Incision	Paraphimosis	1	1							1	
	NERVOUS SYSTEM.										
Neurorrhaphy, bridging of great sciatic lesions.	Partial paralysis great sciatic nerve.	1	1					1			
	SKIN AND CELLULAR TISSUE.										
Incision and drainage	Abscess	25	25							7	18
Do	Carbuncle	1	1							1	
Do	Cellulitis	9	9							7	2
Do	Infected wound	1	1								1
Incision	Staphylococcic infection	2	2					1		1	
Partial excision, 3; avulsion, 1.	Ingrowing toenail	4	4							4	
Excision	Verruca	1	1							1	
Do	Keloid	1	1							1	
	LYMPHATIC GLANDS.										
Removal of gland, 3; incision and drainage, 7.	Adenitis venereal	10	10				2	2		4	2
Incision and drainage, 9; excision and drainage, 1.	Adenitis nonvenereal	10	10					1		6	3
	MUSCLES, TENDONS, FASCIÆ, LIGAMENTS, AND BURSÆ.										
Excision	Ganglion	1	1							1	
	BONES.										
Application Lane plate	Ununited fracture radius	1	1					1			
Do	Ununited fracture ulna	1	1					1			
Autogenous transplantation crest of tibia to deficient metacarpal.	Destruction shaft fifth meta carpal by gunshot wound.	1	1					1			
Incision and drainage	Osteitis of thumb	1	1							1	
Osteotomy	Exostosis	1	1					1			
	JOINTS.										
Reduction and suturing	Dislocation and laceration of finger.	1	1								1
	AMPUTATIONS.										
Amputation	Osteomyelitis, location not stated.	1	1					1			
Amputation of finger	Gunshot wound	1	1					1			
Do	Contracted finger	1	1							1	
	TUMORS.										
Excision	Myomatous cyst	1	1							1	
Do	Papilloma	1	1					1			
Excision, 3; incision, 1	Sebaceous cyst	4	4					1		2	1
	MISCELLANEOUS.										
Suturing	Incised wound	1	1								1
Suturing, 1; incision and drainage, 1.	Lacerated wound	2	2							1	1
Incision and drainage	Punctured wound of foot	2	2							1	1
Ligation of bleeding vessels	Traumatism by firearms	1	1								1
Excision	Encysted piece of wood in hand.	1	1							1	
Total number of cases		163	163				2	32		92	37

INFLUENCE OF SEASON.

Excluding injuries, venereal diseases, alcoholism, and vaccinia, as uninfluenced by the seasons, the highest admission rate was in July, and the lowest in February.

The highest noneffective rate was in August, and the lowest in January. The highest rate for malarial fevers was in July; for American troops it was in March.

TABLE No. 41.—*Influence of season on Philippine scouts, year 1914.*

Months.	Ratio per 1,000 of mean strength.									Prevailing diseases (exclusive of venereal diseases, etc.).
		All causes.					Exclusive of venereal diseases, alcoholism, vaccinia, and injuries.			
		Admissions.			Noneffective.					
	Mean strength.	Total.	Hospital.	Deaths.	Total.	Hospital.	Admissions.	Deaths.	Noneffective.	
January	4,784	49.12	44.52	....	15.83	15.17	39.09	....	10.99	Malaria, 61; dengue, 11; constipation, 10.
February	4,113	43.52	43.52	....	15.91	15.77	35.01	....	10.78	Malaria, 46; acute bronchitis, 13; constipation, 12.
March	4,393	57.36	56.22	....	18.47	18.40	44.62	....	11.95	Malaria, 87; constipation, 16.
April	4,743	54.82	53.98	0.42	20.89	20.69	46.17	....	14.72	Malaria, 75; furuncles, 15; constipation, 11.
May	4,939	57.30	55.48	.20	21.55	21.14	42.32	0.20	14.26	Malaria, 45; furuncles, 18; diarrhea and enteritis, 15.
June	5,195	55.44	52.17	.39	16.87	16.50	44.47	.19	11.30	Malaria, 92; constipation, 14; furuncles, 13.
July	5,108	85.36	82.03	.39	22.99	21.99	68.33	.39	16.28	Malaria, 150; constipation, 24; gastritis, 15.
August	5,041	66.85	66.26	.40	23.25	23.07	53.36	.40	16.25	Malaria, 128; furuncles, 14; constipation, 13.
September	5,542	61.89	60.63	....	22.58	22.52	47.82	....	15.87	Malaria, 103; constipation, 21; acute bronchitis, 17.
October	5,602	73.18	71.58	.89	22.95	22.05	54.62	.54	16.21	Malaria, 115; diarrhea and enteritis, 22; furuncles, 22.
November	5,342	55.41	53.92	.37	21.13	20.75	41.37	.19	13.44	Malaria, 58; diarrhea and enteritis, 17; ankylostomiasis, 13.
December	5,445	48.85	48.12	....	18.90	18.56	37.29	....	11.66	Malaria, 53; constipation, 23; acute bronchitis, 13.
Total	5,020	714.14	693.23	3.19	20.30	19.89	557.57	1.99	13.77	Malaria, 1,013; constipation, 187; acute bronchitis, 116; furuncles, 150; ankylostomiasis, 83.

PREVALENCE OF DISEASES, BY RACES, IN THE PHILIPPINES.

In making this comparison it is to be borne in mind that the native troops were serving in their own country under conditions natural to them, and to which American troops are not accustomed.

The admission and constant noneffective rates were much lower for the Philippine than for the American troops serving in the Philippines.

The rates for the American white and colored troops and Scouts are compared in the following tabulation:

	White.	Colored.	Scouts.
Admission rate	900.54	775.83	714.14
Noneffective rate	31.57	26.21	20.30
Death rate	4.04	2.66	3.19
Discharge rate	11.30	7.45	9.56

TABLE NO. 42.—*Important diseases by races, Philippine Islands, year 1914.*

Diseases.	Admission rates.					
	White troops.		Colored troops.		Philippine Scouts.	
	1914	1913	1914	1913	1914	1913
Venereal diseases	174.79	140.77	233.76	194.37	57.57	36.30
Diarrhea and enteritis	68.78	72.30	37.81	42.52	26.49	21.59
Malaria	48.60	126.27	30.35	38.65	201.80	193.49
Dengue	34.15	22.93	28.75	123.69	5.58	12.75
Bronchitis (acute and chronic)	32.72	28.47	26.62	25.40	24.50	38.66
Tonsillitis (all)	27.83	17.17	16.50	23.19	2.19	3.34
Furunculosis	25.79	24.42	11.71	16.57	29.88	22.96
Alcoholism	25.67	22.29	6.39	10.49	.60	.20
Appendicitis	13.73	6.93	3.73	.55	.60	.59
Dysentery	12.66	23.89	14.38	4.97	8.96	7.06
Trichophytosis	10.63	8.96	15.44	8.28	16.93	18.45
Tuberculosis	6.45	6.29	11.18	8.83	6.57	6.28
Hemorrhoids	6.09	7.36	12.25	9.39	.60	1.18
Conjunctivitis	5.85	4.16	3.19	3.87	8.76	13.74
Articular rheumatism (acute and chronic)	3.34	4.69	1.06	6.63	3.39	3.73
Influenza	2.75	1.71	.....	.....	.....	1.18
Intestinal parasites	2.03	3.09	.53	1.66	10.76	4.32
Pneumonia (lobar)	.96	1.07	.53	2.76	1.59	2.16

SANITATION IN THE PHILIPPINE ISLANDS.

The department surgeon reports as follows:

SANITATION.

Sanitary conditions at the various posts in the department are quite satisfactory, as ndicated by a reduction in the admission rate for nearly all preventable diseases that re controlled by general sanitary measures. No sanitary inspection of the posts in the lepartment was made by either the department surgeon or the sanitary inspector luring the year 1914.

ANTIMALARIAL MEASURES.

A vigorous antimalarial campaign was conducted at all posts in the department and he admission rate for malaria was reduced from 125.4 per 1,000 in 1913 to 93.9 per 1,000 n 1914. The measures adopted included drainage and oiling of pools, grass and brush utting, enforced use of mosquito nets, prophylactic doses of quinine and prolonged reatment of malarial cases to prevent recurrences. It is observed that the admission ate for 1911 is 122.06 for the total force and 75.56 per 1,000 for American troops only.

DISPOSAL OF WASTES.

The dry earth closet system for the disposition of human wastes is still in use at nany posts, although in some of the larger posts, notably Camp Stotsenburg, a water arriage system would ultimately prove more economical and certainly more satis- ictory.

A comprehensive plan for the disposal of wastes at Fort Mills was formulated by a oard convened for the purpose, and steps have been taken to put it in operation.

Incinerators for the destruction of garbage, stable and other wastes were constructed t Fort Mills, Regan Barracks, and the one at Camp John Hay was rebuilt.

WATER SUPPLY.

The water supply at Fort Mills and at Augur Barracks was reported as insufficient n quantity and of poor quality at the former post.

No raw water is used at posts except by such as have access to artesian wells. Every ompany in the entire command is supplied with a mechanical filter for field use.

FOOD SUPPLY.

A number of outbreaks of food poisoning were reported during the year. A special nvestigation was made in each case, and in some of them it was found that the out- reaks were due to faulty handling of foods in the company kitchens. In others, otably those that occurred at Fort William McKinley during June and July, the nvestigation showed that the probable cause was the faulty way in which meats were andled in transit from the cold storage. The meats which apparently caused the out- reaks at Fort McKinley were shipped on a lorcha, which also transported ice for the arget camp, and it was shown that the lower layers of meat were soaked in the water rom the melting ice and presumably decomposed to some extent. The whole subject f meat shipments was thoroughly investigated by the sanitary inspector, and better nethods of handling and shipping meats by boat and rail were instituted. Meat ontainers are now thoroughly cleansed and sterilized, and precautions are taken to revent meats from being soaked in water or to being exposed to flies and dirt in transit. hipments of fresh meat are now expedited.

The investigation into the subject of foods for storage as reserve supplies at Fort Mills was continued, and the antiscorbutic value of a variety of canned vegetables was fixed by an elaborate series of experiments on animals.

CAMP STOTSENBURG.

It is satisfactory to observe that conditions at Camp Stotsenburg are improving relative to admission rates for malarial and venereal diseases, which heretofore have always been high at that post. It is reported:

The malarial rate is considerably lower than in 1913, when it reached 120.99, which was much below that of previous years. Formerly one of the most malarial posts in the islands, it now has a malarial rate considerably below the average rate for the department.

Malarial prophylactic measures have consisted of the following:

1. Mosquito extermination by drainage and grass cutting and the use of crude petroleum as a larvicide.
2. The use of mosquito bars by all individuals.
3. The early diagnosis and vigorous treatment of all malarial cases in screened wards of the hospital until risk of transmission is eliminated.
4. The treatment of all such cases for two months after return to duty.
5. The administration of quinine as a prophylactic to the uninfected under special conditions.

The greatest sanitary defect now existing, as it has for years past, is the lack of screening for barracks and quarters. Mosquitoes are plentiful in spite of unremitting efforts to keep them down. The post has been notorious for malaria for years and the recommendation for proper screening runs through the sanitary reports for a long period. It would appear that something ought to be done to remedy the one crying sanitary defect of the post, even if the comfort of the garrison is to get no consideration.

Present sanitary condition of this post is excellent with the exceptions noted. Screening of all barracks and quarters is the prime necessity.

FORT WINT.

The admission rate for this post was 1,118 per 1,000, of which 227.2 was for venereal diseases, 155.8 for tuberculosis, and 45.5 for alcoholism.

The garrison was withdrawn from this post, and only a small detachment now remains.

The enormous rate for tuberculosis can not be explained.

FORT MILLS.

Fort Mills has become one of the important garrisons in the islands. It is stated:

The general sanitary condition of Corregidor Island is reported as deplorable.

"One-half of the inhabitants of the place use earth closets, improperly constructed, inadequate in capacity, and without proper means of disposal of excreta. Some use tin cans emptied periodically into earth pits. Gangs of convicts carry cans around with them or erect temporary latrines in the vicinity of their work, often within 75 yards of the officers' quarters. The permanent water-carriage system is clogged for lack of flushing. Toilets in officers' quarters and barracks frequently are left for hours without being flushed. Most of them are at all times dirty to look at and offensive to smell. Clothing is washed in filthy water. Officers and men frequently can not get baths even after violent exercise and participation in athletic sports, when they get covered with dust and sweat. Sewers empty into open ravines, where they pollute water running in the vicinity of defensive works and quarters occupied by guards and outposts. This polluted water is used by natives for all purposes and is frequently used by enlisted men (in spite of orders to the contrary) for bathing and washing their clothes." (Extract from a report by the inspector general, Philippine Department, Nov. 27, 1914.)

Plans are under way to increase the water supply.

FORT WILLIAM McKINLEY.

The sanitary condition of Fort William McKinley is reported as "good—much better than it has ever been since it was occupied in 1903." It is stated:

Malaria, dysentery, dengue, bronchial trouble, and venereal diseases have been the prevailing diseases.

The malarial rate was reduced from 71.1 in 1913 to 35.1 in 1914, and in marked contrast to former years, the result of the antimosquito measures adopted at the post. Ninety-five cases of malaria were reported during the year, of which number 26 were from among casuals at the post (target range, recruits en route to stations, and men returning to the United States for discharge), and 9 cases from the Eighth Cavalry, which came to the post from Camp Stotsenburg in November. Of the 95 cases, 59 were admitted during January, February, and March, corresponding to the malarial season in this region, but as the maneuvers were held during the months of January and February it may fairly be assumed that most of the cases acquired the infection in the field.

Barracks are not screened. A large ditch runs through the post, which contains pools which must breed mosquitoes at times during the year. Many old quarries exist near the different garrisons, which formerly were breeding places for mosquitoes. A ditch, with numerous pools, runs west of the quarters occupied by the officers of the Eighth Cavalry and the Medical Corps, in close proximity to the post, which undoubtedly breeds mosquitoes at certain times of the year.

The numerous old quarries on the reservation, in close proximity to the post, have all been drained, and many of them have been filled. It will take years to complete the filling of these quarries, but this work should be continued. In the meantime it will be very easy to keep open the ditches which drain them.

Estimates were made for funds to have the ditch which runs through the post straightened and the bottom rocked and cemented. At one time the money for this work was practically promised, but it was finally decided that it could not be spared. Estimates were again made in July for funds to do this work and to alter the ditch west of the Eighth Cavalry and medical garrisons, but funds were not available.

CAMP KEITHLEY.

At Camp Keithley typhus fever was prevalent during September, October, and November. Twenty-three cases occurred during the epidemic—17 scouts and 6 civilians—which were carefully studied, and a special report was forwarded to the Surgeon General by Capt. George B. Foster, jr., Medical Corps, United States Army. A matter of interest as long as the Government employs native troops is the following comment made by the department surgeon:

A manifest sanitary defect at not only this station, but at many other posts garrisoned by Philippine Scouts, is the method of housing the families of scout soldiers. It appears to be the custom for native soldiers to acquire families and to carry with them from post to post their women and children, and as the Government makes no provision for housing them, scout barrios, in which sanitary conditions are often deplorable, have grown up adjacent to posts. A census of the population of this post compiled in October, 1914, showed 731 civilians, the vast majority of whom were native women and children. These people are housed in old corrals and other buildings on the reservation and in native barrios in Dansalan. As a large proportion of the men live with their families in overcrowded, squalid, and filthy surroundings which the military authorities are powerless to correct, it is obvious that sanitary measures in the post are largely nullified.

The following measures have satisfactorily controlled the malarial situation:

1. The constant and intelligent use of mosquito bars in barracks and hospital is insisted upon. Bars are spread at 4 p. m. daily.

2. Routine blood examinations are made in the instance of all cases, whatever their nature, admitted to hospital. This results in the early diagnosis of malaria cases and in the occasional detection of latent cases which unrecognized would augment the spread of the disease.

3. All patients in whom a positive diagnosis of malaria is made are kept in hospita for one week at least. This undoubtedly swells the immediate sick report, as many of the cases could return to duty on the third or fourth day; but experience has shown that it decreases to a minimum the "return cases," and thus protects the ultimate sick report. While in the hospital the patients receive quinine, 1 gm. t. i. d., until the temperature remains normal, following which the dose is reduced to 650 mg., t. i. d.

4. Upon the discharge from hospital, each patient is taken up on the "malaria register" as an out-patient and a memorandum is sent to his company commander through headquarters, requesting that he report at hospital at 9 a. m. and 5.45 p. m. daily for two weeks, and subsequently each Saturday and Sunday morning for three months. Quinine is taken in the presence of a noncommissioned officer of the Hospital Corps in 650 mg. doses at each visit during the two-week period and in 1 gm. doses during the three-month period.

5. Upon the departure of an organization for another station, a letter is sent to the surgeon at the new station advising him of the members of the organization who were under treatment as out-patients upon the departure of the command. The antimalarial measures have proven effective, as shown by the reduction in the malarial rate.

Present sanitary conditions at this post are excellent.

CLOTHING.

Complaints and recommendations are still made relative to the compulsory use at all times of the legging. The use of trousers, especially when off duty, would make materially for the comfort of our troops. It is apparent that the scientific requirements are not met by the uniform worn in the Tropics, especially as regards the regulation of body temperature.

HAWAII.

The mean enlisted strength of the troops in Hawaii during the year 1914 was 7,971 as compared with 6,130 during 1913. Of these 1,719 were colored troops. Possessing a salubrious and temperate climate, all rates were lower than for the United States. The average number of days' treatment for each case was 13.08 as compared with 13.54 for the United States.

ADMISSION RATES.

The admission rate in 1914 was 523.27 per 1,000 as compared with 701.63 for 1913. The rate for disease in 1914 was 401.96 per 1,000 and for external causes 121.31. That for disease in 1913 was 526.59 and for external causes 175.04.

CONSTANTLY NONEFFECTIVE RATES.

The constantly noneffective rate was 18.75 per 1,000 in 1914 as compared with 24.18 for 1913. The rate for disease was 14.33 and that for external causes 4.42 per 1,000 as compared with 19.23 for disease and 4.95 for injuries in 1913.

DISCHARGE ON CERTIFICATES OF DISABILITY.

The rate for discharge for disability was 9.02 per 1,000, 7.89 being for disease and 1.13 for external causes. In 1913 the total rate was 10.07, that for disease being 9.43 and that for external causes 0.64 per 1,000.

DEATHS.

The death rate was 1.63 per 1,000 as compared with 3.67 in 1913. In actual numbers 13 deaths occurred, 4 being due to external causes and 9 to disease. One of these deaths from external causes was due to drowning, 2 to drinking methyl alcohol, and 1 to a fall over cliff.

TABLE NO. 43.—*Influence of station on officers and enlisted men, Hawaiian Department, year 1914.*

Hawaiian Department.	Mean strength.	Ratio per 1,000 of mean strength.												Average number of days lost.			
		Admissions to sick report.		Discharged on on certificate of disability.		Deaths.		Total losses.		Noneffective from sickness.				From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.	
										From all causes.		Excluding injuries, venereal diseases, alcoholism, and vaccinia.					
		From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	Total.	In hospital.	Total.	In hospital.	For each soldier.	For each case.	For each soldier.	For each case.
Schofield Barracks	5,118	555.30	362.45	9.32	7.50	1.95	1.37	11.27	8.87	12.16	10.57	6.72	5.97	4.44	8.00	2.45	6.77
Fort Shafter	1,756	448.68	271.64	7.64	5.88	1.71	.57	9.35	6.45	.73	.....	.23	.....	.27	.57	.08	.30
Fort Kamehameha	330	681.82	369.70	15.72	12.58	3.03	.....	18.75	12.58	5.56	.....	2.57	.....	2.03	2.98	.94	2.53
Fort Ruger	246	333.33	182.93	4.27	4.27	.....	.....	4.27	4.27	2.36	.....	.74	.....	.86	2.59	.27	1.47
Fort De Russy	182	302.20	159.34	17.14	17.14	.....	.....	17.14	17.14	2.50	.....	1.66	.....	.91	3.02	.60	3.79
Fort Armstrong	132	333.33	181.82	23.26	15.50	.....	.....	23.26	15.50	2.78	.....	1.18	.....	1.02	3.05	.43	2.37
Field, etc.	422	279.62	168.25	.....	.....	.....	.....	.....	.....	.25	.....	.24	.....	.09	.32	.09	.52
Department hospital	82	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Total officers and enlisted men	8,268	523.58	325.71	9.02	7.15	1.81	1.09	10.83	8.24	18.69	17.13	10.68	9.96	6.82	13.03	3.90	11.97
Total enlisted men	7,971	523.27	322.54	9.02	7.15	1.63	1.00	10.65	8.15	18.75	17.61	10.65	10.22	6.84	13.08	3.89	12.05

INVALIDING TO THE UNITED STATES.

In 1914 there were 141 enlisted men invalided home; in 1913, 106. The diseases or conditions causing the highest number of men to be invalided home were: Mental alienation, 32; tuberculosis, 27; venereal diseases, 12; and results of injuries, 21.

Enlisted men invalided home from Hawaii.

Cause.	Number of cases.	Percentage of total cases.	Duty.	Discharged on certificates of disability.	Died.	Otherwise disposed of.	Remaining at end of year.
Mental alienation (defective mental development, 11; dementia præcox, 19; others, 2)	32	22.69	.....	26	.....	1	5
Tuberculosis (pulmonary, 25; other organs, 2)	27	19.15	2	12	4	.....	9
Syphilis	12	8.51	1	9	1	.....	1
Gunshot wound	6	4.26	.....	4	.....	.....	2
Fracture	6	4.26	.....	5	.....	.....	1
Secondary results of injury (injury occurred prior to enlistment)	6	4.26	.....	5	.....	.....	1
Asthma	5	3.55	.....	2	.....	.....	3
Chronic nephritis (interstitial 3; parenchymatous, 2)	5	3.55	.....	3	.....	1	1
Valvular disease of the heart	4	2.84	.....	3	.....	1	.....
Flat foot	4	2.84	.....	3	.....	1	.....
Epilepsy	3	2.13	.....	2	.....	1	.....
Hysteria	3	2.13	.....	3	.....	.....	.....
Scoliosis	1	.71	.....	1	.....	.....	.....
Neuroma	1	.71	.....	1	.....	.....	.....
Arthritis deformans	1	.71	.....	.....	.....	.....	1
Chronic alcoholism	1	.71	.....	1	.....	.....	.....
Cerebrospinal meningitis, epidemic	1	.71	.....	1	.....	.....	.....
Neurasthenia	1	.71	.....	1	.....	.....	.....
Amblyopia	1	.71	.....	.....	.....	.....	1
Chronic myocarditis	1	.71	.....	1	.....	.....	.....
Chronic atrophic rhinitis, with ozena	1	.71	.....	1	.....	.....	.....
Pleurisy	1	.71	.....	.....	.....	.....	1
Ulcer of the stomach	1	.71	.....	.....	.....	1	.....
Hypochlorhydria	1	.71	.....	.....	.....	1	.....
Appendicitis	1	.71	.....	.....	.....	1	.....
Sprue	1	.71	1	.....	.....	.....	.....
Cholangeitis	1	.71	.....	.....	1	.....	.....
Enuresis	1	.71	.....	1	.....	.....	.....
Hydrocele	1	.71	1	.....	.....	.....	.....
Cellulitis	1	.71	.....	.....	.....	1	.....
Erythema	1	.71	1	.....	.....	.....	.....
Keratosis pilaris	1	.71	.....	1	.....	.....	.....
Ethmoiditis	1	.71	.....	1	.....	.....	.....
Necrosis	1	.71	.....	.....	.....	1	.....
Exostosis, oscalcis	1	.71	.....	.....	.....	.....	1
Arthritis	1	.71	1	.....	.....	.....	.....
Bunion	1	.71	.....	1	.....	.....	.....
Sprain	1	.71	.....	1	.....	.....	.....
Concussion of the brain	1	.71	.....	1	.....	.....	.....
Detachment of ligamentum nuchae	1	.71	.....	1	.....	.....	.....
Total cases	141	.....	7	91	6	10	27
Percentage of total cases	.....	100.00	4.96	64.54	4.26	7.09	19.15

The following tabulation for enlisted men furnishes a comparison of general rates for Hawaii with the United States:

	Admission rate.		Noneffective rate.		Death rate.		Discharge rate.	
	1914	1913	1914	1913	1914	1913	1914	1913
Hawaii	523.27	701.63	9.02	10.07	1.63	3.67	18.75	24.18
United States	629.84	619.90	14.82	13.85	4.82	4.95	23.37	22.94

Tables Nos. 43 and 74 give figures for all troops serving in Hawaii. The diseases causing the highest admission and noneffective rates among both officers and enlisted men are shown in the following tabulations:

Admission rates for some of the principal diseases in the Hawaiian department, American troops, officers and enlisted men.

	Admission rates.			
	Total officers and enlisted men.		Total enlisted men.	
	1914	1913	1914	1913
Venereal diseases	65.07	88.47	67.37	91.68
Bronchitis	32.65	55.17	32.87	56.12
Influenza	28.42	30.01	26.72	26.10
Diarrhea and enteritis	26.85	21.26	26.60	21.04
Furuncle	22.62	32.51	22.96	33.77
Constipation	17.42	17.04	17.69	17.62
Tonsillitis	15.24	22.04	15.18	23.00
Alcoholism (all)	11.61	10.94	12.04	11.42
Rheumatism, muscular	11.01	13.75	10.41	13.38
Appendicitis	6.89	10.47	6.90	9.62
Cellulitis	6.05	9.38	5.90	9.30
Gastritis, acute and chronic	5.92	15.79	5.65	15.00
Mental alienation	3.63	4.22	3.64	4.73
Tuberculosis (all)	3.02	4.22	3.01	4.24
Rheumatism, acute and chronic articular	2.66	2.03	2.63	1.79
Lymphadenitis, nonvenereal	2.54	2.66	2.63	2.77
Rhinitis, acute	1.94	4.38	1.51	4.08
Malarial fevers	1.33	8.13	1.25	8.48
Enuresis	.97	2.03	1.00	2.12
Flat feet	.48	2.19	.50	2.28

Noneffective rates for some of the principal diseases in the Hawaiian department, American troops, officers and enlisted men.

	Noneffective rates.			
	Total officers and enlisted men.		Total enlisted men.	
	1914	1913	1914	1913
Venereal diseases	3.41	4.85	3.53	5.04
Bronchitis	.69	1.04	.70	1.07
Influenza	.55	.52	.56	.43
Appendicitis	.54	.92	.53	.88
Diarrhea and enteritis	.37	.23	.37	.23
Furuncle	.36	.54	.36	.56
Mental alienation	.34	.42	.33	.48
Rheumatism, muscular	.27	.37	.27	.37
Tonsillitis	.26	.32	.26	.33
Tuberculosis (all)	.23	.31	.23	.32
Rheumatism, acute and chronic articular	.21	.20	.21	.21
Cellulitis	.20	.26	.20	.25
Constipation	.19	.15	.19	.16
Gastritis, acute and chronic	.15	.37	.14	.37
Alcoholism (all)	.14	.14	.14	.15
Lymphadenitis, nonvenereal	.09	.11	.10	.11
Flat foot	.04	.12	.04	.12
Malarial fevers	.03	.16	.03	.16
Enuresis	.03	.13	.03	.11
Rhinitis, acute	.02	.05	.02	.05

SPECIAL DISEASES.

TYPHOID.

There was no typhoid fever, but one case of paratyphoid fever occurred.

MALARIA.

But 11 cases among officers and enlisted men during the year; the noneffective rate was 0.03, a remarkably low one in a tropical country.

SMALLPOX.

None occurred.

INFLUENZA.

Two hundred and thirty-five cases occurred and caused the largest number of admissions excepting venereal diseases and bronchitis.

BRONCHITIS.

There were 270 cases with an admission rate of 32.65.

TUBERCULOSIS.

There were 25 cases; 21 of these were pulmonary tuberculosis.

VENEREAL DISEASES.

The admission rate for venereal diseases fell more than 27 per cent for 1914. There were 150 cases of syphilis; 64 of chancroid; 324 of gonorrhea.

ALCOHOLISM AND ITS RESULTS.

The admission rate was 11.61.

DYSENTERY.

There were no cases of dysentery during 1914.

DIARRHEA AND ENTERITIS.

There were 222 cases during the year, with an admission rate of 26.85.

MENTAL ALIENATION.

The admission rate was 3.63, with 30 cases for the year.

SANITATION.

Certain improvements have been recommended and are under way with reference to the disposal of sewage from several of the posts on the island of Oahu. Most sanitary defects are minor in character and have to do more with comfort and contentment than with health. A supply of water, abundant as well as of good quality, is more than usually desirable in tropical countries. The use of electricity for illuminating purposes is instance of an agency not directly concerned in health, and yet which influences it. Dwellings that are comfortable and not overheated are more likely to be occupied during the hours that malaria and other insect-borne diseases are acquired, than quarters that are rendered uncomfortable and unattractive through inferior methods of lighting, which render them unnecessarily warm. Criticisms have also been made of the types of buildings constructed for the use of troops in the Tropics, and it is believed that further study can be advantageously made for use in developing a more comfortable building. It is not so much a matter of ventilation, but a matter of movement of air that renders buildings comfortable in the Tropics.

PANAMA CANAL ZONE.

The mean strength of all troops including officers serving in the Panama Canal Zone during the year 1914 was 2,076.

ADMISSION RATES.

The admission rates for all causes was 938.35, that for disease being 818.88 and that for external causes being 119.46. The diseases causing the highest admission rates were: Venereal diseases, 131.50 per 1,000; malarial fevers, 205.20; diseases of the pharynx, 56.83; influenza, 31.31, and appendicitis, 21.68.

The Department surgeon of the Eastern Department, in his annual report for 1913, states with reference to malaria in the Canal Zone:

> It is understood that the extending of Gatun Lake has changed the physical conditions near Las Cascadas and in part accounts for the presence of anopheles, and thus explains the increase in malarial fevers. The necessity of guarding the locks of the canal is said by the commanding officer of the Tenth Infantry to account for some cases, it being at times impracticable to properly protect the men. Besides, the health department of the zone has turned over the sanitation of that reservation to the military authorities there, and the issue of a sufficient quantity of crude petroleum and the proper larvicide was delayed until some time after such transfer was effected. Both of these conditions are being met and it is expected that the disease will in a measure be controlled as far as it is possible to do so in that climate.

CONSTANTLY NONEFFECTIVE RATES.

The noneffective rate was 36.45 for all causes, that for disease being 32.57 per 1,000, and that for external causes, 3.88. The diseases causing the highest noneffective rates were: Venereal diseases, 6.62 per 1,000; malarial fevers, 7.67; appendicitis, 1.34; diseases of the pharynx, 1.03; mental alienation, 0.91, and tuberculosis 0.16.

DISCHARGE ON CERTIFICATE OF DISABILITY.

The rate for discharge on certificates of disability was 10.94.

DEATHS.

The death rate was 3.21 per 1,000, that for disease being 0.46, and for external causes, 2.75. In all there were 7 deaths. Included in this number were 6 deaths from external causes.

TABLE NO. 44.—*Movement of sick in Panama Canal Zone, years 1914 and 1913, officers and enlisted men, American troops.*

	Years.	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
		Total.	In hospital.	Total.	In hospital.
Ratio per 1,000 of mean strength:					
Admissions to sick report	1914	938.35	709.54	677.75	.....
	1913	845.42	457.79	539.83	.....
Discharges on certificate of disability	1914	10.94	.....	9.04	.....
	1913	38.90	.....	35.13	.....
Deaths	1914	3.21	.....	.46	.....
	1913	8.32	.....	2.38	.....
Total losses	1914	14.15	.....	9.50	.....
	1913	47.22	.....	37.51	.....
Noneffective	1914	36.45	27.47	25.88	19.28
	1913	29.58	23.02	20.73	16.34
Average number of days lost:					
For each soldier	1914	13.30	10.02	9.45	7.04
	1913	10.80	8.40	7.57	5.96
For each case	1914	14.18	14.13	13.94	.....
	1913	12.77	18.36	14.02	.....

Admission rates for some of the principal diseases for Panama Canal Zone, American troops, officers and enlisted men.

	Admission rates.			
	Total officers and enlisted men.		Total enlisted men.	
	1914	1913	1914	1913
Malarial fevers	205.20	143.88	208.96	145.55
Venereal diseases	131.50	186.68	135.82	196.99
Tonsillitis	46.72	38.05	47.76	36.39
Influenza	31.31	30.92	31.34	32.62
Lymphadenitis, nonvenereal	21.68	20.21	22.38	21.33
Appendicitis	21.68	24.97	21.89	22.58
Bronchitis	18.30	19.03	18.91	20.08
Diarrhea and enteritis	15.41	4.76	15.92	5.02
Hemorrhoids	13.97	5.95	14.43	6.27
Furuncle	12.52	23.78	12.94	23.84
Alcoholism (all)	9.63	10.70	9.95	16.29
Rheumatism, muscular	8.19	10.70	8.46	10.04
Rhinitis, acute	7.71	8.32	7.46	6.27
Pleurisy	7.23	3.57	7.46	3.76
Flat foot	6.26	11.89	6.47	12.55
Rheumatism, articular (all)	4.34	4.76	4.48	5.01
Tuberculosis (all)	2.41	3.57	2.49	3.76
Dysentery	.....	3.57	.....	3.76

Noneffective rates for some of the principal diseases for Panama Canal Zone, American troops, officers and enlisted men.

	Noneffective rates.			
	Total officers and enlisted men.		Total enlisted men.	
	1914	1913	1914	1913
Malarial fevers	7.67	5.21	7.79	5.31
Venereal diseases	6.62	5.13	6.83	5.41
Lymphadenisis, nonvenereal	1.41	1.62	1.46	1.71
Appendicitis	1.34	1.68	1.38	1.59
Tonsilitis	.80	.91	.83	.91
Flat foot	.66	.50	.68	.52
Influenza	.64	.53	.66	.56
Hemorrhoids	.50	.28	.52	.30
Bronchitis	.49	.52	.51	.55
Diarrhea and enteritis	.33	.10	.34	.10
Pleurisy	.31	.11	.32	.12
Rheumatism, articular (all)	.25	.05	.26	.05
Rheumatism, muscular	.16	.22	.16	.19
Tuberculosis (all)	.16	.64	.17	.68
Furuncle	.14	.36	.15	.36
Alcoholism (all)	.08	.10	.08	.10
Rhinitis, acute	.04	.03	.04	.02
Dysentery	.....	.15	.....	.15

INVALIDING TO THE UNITED STATES.

Sixty-three men were invalided home, 9 being for mental alienation, 9 for flat foot, 4 for gonorrhea, 3 for epilepsy, and 3 for fractures.

Enlisted men invalided home from the Panama Canal Zone.

Cause.	Number of cases.	Percentage of total cases.	Duty.	Discharged on certificates of disability.	Otherwise disposed of.	Remaining at end of year.
Mental alienation (general paralysis of the insane, 1; defective mental development, 3; dementia precox, 5)	9	14.29	.....	8	.....	1
Flat foot	9	14.29	3	6	.....	.....
Gonorrhea	4	6.35	.....	1	.....	3
Epilepsy	3	4.76	1	2	.....	.....
Fracture	3	4.76	.....	2	.....	1
Secondary results of injury (contracted prior to enlistment)	3	4.76	.....	3	.....	.....
Valvular disease of the heart	2	3.17	.....	2	.....	.....
Asthma	2	3.17	.....	1	1	.....
Arthritis	2	3.17	.....	2	.....	.....
Crushing	2	3.17	.....	2	.....	.....
Dislocation	2	3.17	.....	.....	2	.....
Aestivo-autumnal fever	1	1.59	1	.....	.....	.....
Syphilis	1	1.59	1	.....	.....	.....
Sarcoma	1	1.59	.....	1	.....	.....
Chronic articular rheumatism	1	1.59	1	.....	.....	.....
Diabetes insipidus	1	1.59	.....	1	.....	.....
Paralysis agitans	1	1.59	.....	1	.....	.....
Neurasthenia	1	1.59	.....	1	.....	.....
Cycloplegia, both eyes	1	1.59	.....	1	.....	.....
Deafness	1	1.59	1	.....	.....	.....
Cardiac hypertrophy	1	1.59	.....	1	.....	.....
Varicocele	1	1.59	.....	.....	.....	1
Tachycardia	1	1.59	1	.....	.....	.....
Chronic bronchitis	1	1.59	1	.....	.....	.....
Ulcer of the stomach	1	1.59	.....	1	.....	.....
Inguinal hernia (operation declined)	1	1.59	.....	1	.....	.....
Peritoneal adhesions following an appendectomy	1	1.59	.....	1	.....	.....
Chronic nephritis, interstital	1	1.59	.....	1	.....	.....
Pyelitis	1	1.59	.....	1	.....	.....
Scar on neck, extensive	1	1.59	1	.....	.....	.....
Mastoiditis, resulting in deafness	1	1.59	.....	1	.....	.....
Dupuytrens contraction	1	1.59	.....	1	.....	.....
Thecitis	1	1.59	1	.....	.....	.....
Total cases	63	.....	12	42	3	6
Percentage of total cases	.....	100.00	19.05	66.67	4.76	9.52

Tables Nos. 44 and 73 give the figures for all troops serving in the Canal Zone, including officers, and Table No. 76 gives rates for enlisted men only.

PORTO RICO.

The troops are all recruited and partly officered by native Porto Ricans. The regiment is commanded by a United States Army officer. The two garrisoned posts have a mean strength for 1914 of 707 officers and men.

ADMISSION RATES.

The admission rate for all causes in 1914 was 615.28, as compared with 801.26 in 1913; for disease 534.65, as compared with 711.36; and for external causes 80.62, as against 89.91.

The improvement of health conditions among the troops is indicated by the lesser rates for 1914. The admission rate is 25 per cent smaller than for the preceding year. There are lower rates for venereal and malarial diseases. The decrease in malaria is most encouraging, amounting to over 50 per cent. As shown by the tabulation, rhinitis gave much the highest admission rate and the greater noneffective rate. The continued decrease of preventable diseases in the Tropics is a matter of satisfaction.

NONEFFECTIVE RATES.

The noneffective rate is also lower than for the preceding year, being 21.64 for 1914 and 24.01 for 1913. The rate for disease was 18.93, as compared with 20.73 for 1913. Less malarial disease is also noted.

Some of the principal diseases, with the highest admission and noneffective rates, for 1914 and 1913 were:

Admission rates per 1,000 of mean strength, years 1913 and 1914.

	1914	1913
Rhinitis, acute	115.98	56.78
Venereal diseases	66.48	72.56
Chancroid and results	16.97	28.39
Gonorrhea and results	18.39	28.39
Syphilis and results	31.12	15.77
Acute abscess and cellulitis	50.92	75.71
Diarrhea and enteritis	36.78	67.82
Diseases of the lymphatic system	19.80	23.66
Furuncle	15.56	6.31
Malarial fevers	12.73	29.97
Tonsillitis	12.73	22.08
Rheumatism, articular (all)	11.32	3.15
Rheumatism, muscular	9.90	12.62
Dengue	8.49	.....
Dysentery	7.07	7.89
Ankylostomiasis	5.66	20.50
Smallpox	2.83	.....
Filariasis	1.41	9.46
Bronchitis, acute and chronic	1.41	.....
Febricula and undetermined fevers	1.41	.....
Influenza	.....	26.81

Highest noneffective rates per 1,000 of mean strength for 1913 and 1914.

	1914	1913
Venereal diseases	3.84	4.58
Rhinitis, acute	1.38	.72
Intestinal parasites	1.11	.40
Acute abscess and cellulitis	.90	1.40
Diarrhea and enteritis	.75	.64
Diseases of the lymphatic system	.71	1.32
Tuberculosis	.43	1.47
Appendicitis	.41	.13
Furuncle	.38	.10
Rheumatism, articular (all)	.32	.33
Rheumatism, muscular	.28	.31
Malarial fevers	.23	.55

DISCHARGES ON CERTIFICATE OF DISABILITY.

The rate for discharge for disability was 8.97 per 1,000 for disease. In 1913 the rate was 8.42 per 1,000, all for disease.

DEATHS.

The death rate was 4.24 per 1,000. The actual number of deaths was 3. All were due to external causes. In 1913 there were 2 deaths due to disease.

CHINA.

The mean strength of all troops, including officers, serving in China during 1914 was 1,091. This force consisted of Infantry, a detachment of Signal Corps, Hospital Corps, and noncommissioned staff, all white.

ADMISSION RATES.

The admission rate for all causes was 1,063.24, that for disease being 949.58 and that for external causes 113.66. The diseases causing the highest admission and noneffective rates are shown in the following tabulations.

CONSTANTLY NONEFFECTIVE RATES.

The noneffective rate was 28.88 for all causes, the rate for disease being 26.44 and that for external causes 2.44.

The principal diseases for China—Admission rates for American troops, officers and enlisted men.

	Admission rates.			
	Total officers and enlisted men.		Total enlisted men.	
	1914	1913	1914	1913
Venereal diseases	381.30	217.91	396.37	226.15
Diarrhea and enteritis	57.74	45.17	57.31	42.70
Constipation	50.00	53.88	56.35	55.92
Tonsillitis	40.33	25.36	41.07	26.32
Alcoholism (all)	39.41	23.77	41.07	24.67
Rheumatism, muscular	31.16	19.81	32.47	20.56
Bronchitis	30.25	21.39	38.65	22.20
Malarial fevers	22.00	13.47	20.06	13.16
Influenza	20.16	58.64	19.10	57.57
Lymphadenitis, nonvenereal	18.33	19.02	19.10	18.91
Pneumonia (lobar)	10.08	9.51	10.51	9.05
Dysentery	9.17	1.58	8.60	.82
Appendicitis	8.25	3.96	8.60	4.11
Furuncle	7.33	15.06	7.64	14.80
Tuberculosis (all)	6.42	3.17	6.69	3.29
Rheumatism, articular (all)	4.58	6.34	3.82	6.59
Mumps	.92	23.77	.96	24.67
Pleurisy	.92	15.85	.96	16.45
Typhus fever	.92	2.38	.96	2.47

Noneffective rates for American troops, officers and enlisted men.

	Noneffective rates.			
	Total officers and enlisted men.		Total enlisted men.	
	1914	1913	1914	1913
Venereal diseases	15.39	8.94	16.03	9.28
Lymphadenitis, nonvenereal	1.06	.73	1.10	.75
Tuberculosis (all)	.92	.56	.96	.58
Pneumonia (lobar)	.57	1.04	.60	1.05
Appendicitis	.51	.58	.53	.60
Rheumatism, muscular	.47	.44	.49	.46
Tonsillitis	.41	.33	.41	.35
Diarrhea and enteritis	.40	.36	.41	.35
Constipation	.39	.42	.40	.44
Bronchitis	.39	.27	.37	.28
Alcoholism (all)	.34	.24	.36	.25
Influenza	.32	.88	.27	.85
Dysentery	.31	.15	.29	.14
Malarial fevers	.29	.25	.27	.24
Rheumatism, articular (all)	.12	.44	.07	.46
Typhus fever	.11	.41	.11	.43
Furuncle	.04	.20	.04	.19
Mumps	.02	.83	.02	.86
Pleurisy	.01	.65	.01	.67

DISCHARGE ON CERTIFICATE OF DISABILITY.

The discharge rate for disability was 3.82 for all causes.

DEATHS.

The death rate was 5.50 per 1,000, the rate for disease being 4.58, and that for external causes being 0.92. Both discharge and death rates were lower than for 1913.

Tables Nos. 3, 75, and 76 give all figures for the troops serving in China for the year 1914.

The rates indicate that general health conditions have decidedly deteriorated during the year. Notable is the failure regarding preventable diseases: 75 per cent increase in venereal diseases; nearly 70 per cent in malaria; 480 per cent in dysentery, and 34 per cent in diarrhea and enteritis.

TABLE No. 46.—*Showing comparison of rates for the several countries garrisoned by the United States Army.*

COMPARISON OF RATES (PER 1,000 OF MEAN STRENGTH) YEAR 1914, OFFICERS AND ENLISTED MEN.

	Admissions.	Noneffective.	Discharges.	Deaths.
American troops, including officers:				
United States	622.28	23.41	14.82	4.87
Alaska	408.14	10.17	8.74	8.35
Philippine Islands	865.79	30.56	10.62	3.64
China	1,063.24	28.88	3.82	5.50
Hawaii	523.58	18.69	9.02	1.81
Panama, Canal Zone	938.35	36.45	10.94	3.21
The Army	657.73	23.98	12.99	4.53
Native troops:				
Porto Rican regiment	615.28	21.64	8.97	4.24
Philippine Scouts	714.14	20.30	9.56	3.19

	Venereal diseases.		Malarial fevers.		Tuberculosis.	
	Admissions.	Noneffective.	Admissions.	Noneffective.	Admissions.	Noneffective.
American troops, including officers:						
United States	85.84	3.58	10.74	0.24	2.72	2.24
Alaska	20.88	.29	2.09	.04	1.04	.33
Philippine Islands	174.86	9.78	46.97	1.29	7.05	.60
China	381.30	15.39	22.00	.29	6.42	.92
Hawaii	65.07	3.41	1.33	.03	3.02	.23
Panama, Canal Zone	131.50	6.62	205.20	7.67	2.41	.16
The Army	105.73	4.51	20.16	.57	3.34	1.78
Native troops:						
Porto Rican regiment	66.48	3.84	12.73	.23	1.41	.43
Philippine Scouts	57.57	3.66	201.80	3.48	6.57	.82

EXPEDITIONARY FORCE, VERA CRUZ, MEXICO.

The mean strength of the troops, officers and enlisted men, was 2,402. This force embraced Infantry, Field Artillery, Signal Corps, and Hospital Corps. Yellow fever was not present at the time of occupation, nor had it been for some years.

Tables Nos. 3 and 73 give all figures for troops serving in Vera Cruz, Mexico, in the year 1914.

ADMISSION RATE.

The admission rate during the occupancy of Vera Cruz was 945.28 per 1,000 for enlisted men. The rate for disease being 862.31, and for injury 82.97.

NONEFFECTIVE RATE.

The noneffective rate was 20.06. The average number of days under treatment was 7.32 for each soldier sick. The rate for discharge was 3.53 per 1,000.

DEATHS.

There were 14 deaths, 7 from disease and 7 from injury, giving a rate of 6.18 per 1,000.

SPECIAL DISEASES.

One hundred and fifty-eight cases of malaria occurred, of which 76 were due to infection with the estivoautumnal plasmodium.

No typhoid, paratyphoid, nor smallpox occurred.

Twelve cases of tuberculosis of the lungs occurred, with one death.

The admission rate for venereal disease was 359.70, with a noneffective rate of 5.21 per 1,000.

There were 56 cases of dysentery, with a rate of 23.31 per 1,000. Ten of these cases were entamoebic.

The rate for alcoholism was 29.56 per 1,000.

Diarrhea and enteritis cause the highest admission rate after venereal and malarial diseases, giving a rate of 78.68; bronchitis, 35.39 per 1,000; diseases of the pharynx, 24.57; dysentery, 23.31.

SANITATION, EXPEDITIONARY FORCE AT VERA CRUZ.

A most interesting sanitary problem was presented by the occasion which sent an expeditionary force in April to Vera Cruz. This force, which sailed from Galveston, occupied Vera Cruz with the marines already there. The municipal affairs of the city were taken over by the military authorities and the sanitation and work performed by the local board of health was undertaken by medical officers of the Army. The city health department, following the occupation by the

Navy, was placed temporarily in charge of Dr. G. M. Guiteras, and the quarantine of the port was in charge of Dr. Rudolph H. von Ezdorf, both of the United States Public Health Service. On May 13, 1914, Col. H. P. Birmingham, Medical Corps, United States Army, arrived and assumed charge as chief surgeon. In his report to the Surgeon General he states:

The sanitary service was rearranged under the following coordinate heads:

1. *Sanitary service.*—United States expeditionary forces, including the First Advanced Brigade, United States Marine Corps, Brig. Gen. Frederick Funston, commanding; chief surgeon, Col. Henry P. Birmingham, Medical Corps; sanitary inspector, Maj. Frederick M. Hartsock, Medical Corps; director of pathological laboratory, Maj. F. F. Russell, Medical Corps.

2. *Under the military governor.*—City of Vera Cruz, Mexico, Brig. Gen. Frederick Funston, military governor; chief sanitary officer, Col. Henry P. Birmingham, Medical Corps; director of public health, Maj. Theodore C. Lyster, Medical Corps; Assistant director of public health, Maj. Robert E. Noble, Medical Corps.

3. *Department of maritime quarantine.*—Officer in charge, Dr. Rudolph H. von Ezdorf, United States Public Health Service. Maj. E. E. Persons, Medical Corps, United States Army, relieved Maj. Theodore C. Lyster as director of public health September 2, 1914.

The comprehensive sanitary order which was issued upon Col. Birmingham's recommendation is as follows:

1. *Disposal of garbage.*—For detachments or companies in camps, or in isolated locations where other means are not available, the incinerator shall be installed. Blue prints for same will be obtained at the chief surgeon's office. Material (brick, 340; lime, three-fourths bag) will be obtained on requisition from the quartermaster. Where disposal may be readily made by means of the city carts, the garbage can may be used. The cans shall be thoroughly cleansed, scalded, and coated with crude petroleum after emptying. Liquid waste may be poured into city sewer openings where available; in such cases, however, a cover shall be provided for same and the surroundings kept free from grease, etc. Tin cans shall be incinerated, afterwards smashed or perforated and disposed of as dry garbage. Ashes, dry garbage, etc., shall be hauled to and deposited on the city dump at end of Francisco Canal Street.

2. *Disposal of manure and care of picket lines.*—All manure shall be hauled to the city dump. Picket lines shall be kept broom swept and all manure and straw hauled off daily. A weekly incineration of the picket lines shall be accomplished with crude oil at the rate of 10 gallons to each line. Crude oil may be obtained from the Quartermaster Corps on usual requisition.

3. *Disposal of excreta.*—Where a water-carriage system is not feasible the Havard box shall be used over the earth latrines. Daily inspection of this system is enjoined on the part of the medical officer of the organization, who will see that the following plan is carried out:

The latrine shall be burned out thoroughly with crude oil and hay twice a day. (Each burning, 1 gallon crude oil and 7.5 pounds hay.)

The boxes shall be at all times kept fly tight; this implies closure of all cracks and care of the hinges and a back construction so that the lids drop automatically. The latrine seats shall be washed off twice weekly with a one one-hundredth solution of cresoline and whitewashed inside twice weekly. Latrines shall be rebuilt when filled to within 2 feet of the top. Where water carriage system is in vogue, either the automatic flush or trough system shall be installed.

4. Kitchens and mess rooms shall be securely screened and an efficient fly trap be provided for catching such flies as gain entrance thereto. Ice boxes installed shall be inspected daily and drip pans emptied and scalded out. Garbage cans shall be kept on wooden racks and elevated from the ground and cans burned out daily with oil to prevent fouling, and kept clean outside with a coat of whitewash.

5. Arrangements shall be made for the installation of shower baths for all troops and a careful inspection shall be made daily to see that waste water therefrom is so disposed of as to prevent mosquito breeding.

6. The city water supply is considered potable. The terminal water supply is at present unfit for human consumption.

7. The use of the mosquito bar is imperative, and it shall be used in all districts where mosquitoes are prevalent.

8. Attention is called to the use of the following foods, the elimination of which from messes will serve to prevent a variety of intestinal disorders:

(*a*) Hashes of meats and potatoes prepared the night previous. (Ptomaine poisoning of severe type.)

(*b*) Canned milk and fish opened the day before. (Fish and milk poisoning.)

(*c*) Locally grown green vegetables, uncooked. (Dysenteries and diarrhea.)

9. The daily use of three grains of sulphate of quinine as a malarial prophylactic is made compulsory for all troops.

10. Surgeons of organizations shall make a daily inspection of the commands to which they pertain, covering the following: Picket lines, latrines, kitchens, barracks, inclosed toilets, baths, garbage receptacles, incinerators and all food supplies; they shall make a verbal report at once to their respective commanding officers for the correction of any sanitary defects noted, and a similar report with the action taken, to the sanitary inspector on his next visit.

11. A special report shall be made at once by the surgeon of each organization to the sanitary inspector for the information of the chief surgeon in the following cases:

(*a*) Acute infectious or contagious diseases developing in barracks or camp.

(*b*) Cases of fever of 101° or over, attended with albuminuria.

(*c*) Unusual prevalence of mosquitoes in vicinity.

(*d*) Development of amoebic or bacillary dysentery or malaria in the command.

12. Venereal prophylaxis and venereal inspection shall be carried out thoroughly and the required monthly report of number of new cases of venereal diseases shall be sent to the chief surgeon through the sanitary inspector each month.

13. Areas about barracks in which mosquitoes could breed, such as cisterns, tanks, woods, gutters, pools, and drains, shall be kept under close observation by the surgeon and the proper remedies applied, i. e., screening, draining, oiling, etc.

(Col. Birmingham's full report will be found in the March number of the Military Surgeon, 1915.)

Field Hospital Company No. 3, in command of Maj. Allie W. Williams, Medical Corps, United States Army, was given an excellent building, the preparatory school of Vera Cruz, and used it as a base hospital. The building included ample space for wards and private rooms and had a bed capacity of 216. The Hospital Corps personnel were quartered therein. The Army field laboratory was quartered in the portion of the building that formerly served as the chemical laboratory of this school. Maj. Frederick F. Russell, Medical Corps, United States Army, was in charge. All classes of laboratory work were done here, and the value of this unit was demonstrated in the accurate work done to assist in the diagnosis of various cases of disease. Such work is necessary in controlling epidemic diseases likely to arise under the circumstances.

BOARDS FOR THE STUDY OF TROPICAL DISEASES.

The board for the study of tropical diseases as they exist in the Philippine Islands was dissolved October 24, 1914, and this work has since been carried on by the department laboratory at Manila.

Maj. Bailey K. Ashford, Medical Corps, has been the representative in Porto Rico of the Army Medical Department for the study of tropical diseases as they exist there.

It was originally planned that Maj. Percy M. Ashburn, Medical Corps, who was relieved from duty in Manila and sent to Panama, would organize a board at the latter place for the study of tropical diseases. This, however, has not yet been accomplished.

TRANSPORTS.

The sanitary conditions on these ships have been in the main satisfactory and those sanitary faults which have existed have been corrected from time to time. The most important complaint that has been received was in connection with epidemic diseases which appeared during voyages. This matter was commented on at length in the report for 1914. In the movement of large bodies of troops there is no practical means to quarantine against the development of infectious diseases en route. This is not done in civil life and it is specially impracticable under military conditions where so large a portion of the personnel is susceptible to such diseases as measles, mumps, etc.

GENERAL HOSPITALS.

LETTERMAN GENERAL HOSPITAL, SAN FRANCISCO, CAL.

This hospital is used as a base hospital for the Philippines and Hawaii; a post hospital for the Presidio, San Francisco, Fort Winfield Scott, and several smaller posts in the harbor of San Francisco, and a general hospital for the western part of the country. It is the largest general hospital in the Army.

The number of patients admitted during the year, including civilians and general prisoners, was 2,623. This was a decrease of 160 from the preceding year.

The average number of days in hospital for each case was as follows:

	Officers.	Enlisted men.	General prisoners.	Civilians.	
				Male.	Female.
Medical	34.60	27.99	21.51	24.99	12.15
Surgical	24.02	32.22	24.26	14.62	12.60
Venereal	73.00	29.40	44.00	64.80	.....
Mental	95.50	72.29	75.71	14.60	.....

The following tables show the movement of the sick, together with the principal sources of admission, during the calendar year 1914, civilians and general prisoners being included:

	Officers and enlisted men.	General prisoners.	Civilians.	Total.
ADMISSIONS.				
Command	118	1	56	175
Transfer	1,565	55	28	1,648
Otherwise	46	2	551	599
Remaining, 1913	189	5	16	210
Total	1,918	63	651	2,632
DISPOSITIONS.				
Duty	1,162	32	17	1,211
Died	29	2	25	56
Discharged for disability	342	.....	.....	342
Deserted	3	.....	.....	3
Discharged, expiration term	59	1	.....	60
Transferred to Government Hospital for the Insane	19	3	1	23
Transferred to Fort Bayard, N. Mex	72	1	.....	73
Transferred to other hospitals	16	15	1	32
Otherwise disposed of	74	4	571	649
Remaining, 1914	142	5	36	183

There were 23 deaths during the year among those on sick report, and 6 in addition, making 29 deaths, among officers and enlisted men. There were 25 deaths among civilian patients. The principal causes being as follows:

Broncho pneumonia	7
Valvular heart disease	5
Drowning, accidental	5
Lobar pneumonia	3

Tuberculosis of the lungs	3
Abdominal tuberculosis	2
Arterial sclerosis	2

There were 342 discharged on certificate of disability. Of this number 256 were not in line of duty, and 86 in line of duty. The causes were as follows:

	In line of duty.	Not in line of duty.
Dementia precox	6	46
Flat foot	1	24
Syphilis	.....	18
Constitutional psychopathic state	.....	18
Hysteria	.....	15
Epilepsy	.....	14
Tuberculosis, pulmonary	7	19
Neurasthenia	4	10
Other diseases of organs of locomotion	8	8

The following is a statement of admissions and dispositions of insane patients during the year:

Movements of the insane.

	Officers and enlisted men.	General prisoners.	Civilians.	Total.
Returned to duty	10	.....	.....	10
Left hospital	.....	.....	4	4
Discharged on certificates of disability	78	.....	.....	78
Died	1	.....	.....	1
Transferred to Government Hospital for Insane	19	3	1	23
Transferred to recruiting officers for disposition	12	.....	.....	12
Transferred to other hospitals	1	.....	.....	1
Sent home for discharge	5	4	.....	9
Discharged without honor on account of fraudulent enlistment	4	.....	.....	4
Discharged per expiration of term of enlistment	1	.....	.....	1
Total	131	7	5	143

An active surgical clinic is maintained at this hospital, the following being a condensed tabular statement of the surgical operations:

Operations.

	Officers.	Enlisted men.	Total.	Retired officers.	Retired enlisted men.	Accepted recruits.	General prisoners.	Army Nurse Corps.	Civilians.	Total.	Grand total.
Cranium	.....	4	4	.....	.....	.....	.....	.....	.....	.....	4
Eye	2	26	28	.....	.....	.....	.....	.....	7	7	35
Nose	39	69	108	2	.....	.....	3	.....	114	119	227
Ear	.....	12	12	.....	.....	.....	.....	.....	3	3	15
Throat	14	26	40	.....	.....	.....	1	1	79	81	121
Face	.....	1	1	.....	.....	.....	.....	.....	7	7	8
Neck	1	12	13	.....	.....	.....	.....	.....	4	4	17
Upper extremity	2	20	22	.....	2	.....	7	.....	9	18	40
Thorax	.....	1	1	.....	.....	.....	.....	.....	6	6	7
Abdomen (laparotomy)	7	60	67	1	1	.....	10	6	45	63	130
Gynecological, external	.....	.....	.....	.....	.....	.....	.....	.....	55	55	55
Gynecological, internal	.....	.....	.....	.....	.....	.....	.....	.....	53	53	53
Lower extremity	9	32	41	.....	1	1	7	.....	22	31	72
Major (not included)	.....	4	4	.....	.....	.....	.....	.....	6	6	10
Minor (not included)	9	54	63	.....	3	.....	1	.....	36	40	103
Obstetrical	.....	.....	.....	.....	.....	.....	.....	.....	31	31	31
Total	83	321	404	3	7	1	29	7	475	522	926

NOTE.—Double tonsil operations have been reported as one operation.

Included in this list are 34 operations for appendicitis, 24 for hernia, 22 for hemorrhoids, and 125 gynecological. In the gynecological department 56 women were delivered at term, and there were four stillbirths. Two Caesarian sections were successful.

Of the operations performed five were followed by death.

The following is a statement of the work done in the eye, ear, nose, and throat clinic:

	Hospital cases.	Out cases.	Total.
Officers	114	122	236
Enlisted men	432	305	737
Families of officers and enlisted men	124	345	469
Civilian employees	18	48	66
Families of civilian employees	15	27	42
Army Nurse Corps	3	80	83
Civilians, including Civil War veterans	41	117	158
Total	747	1,044	1,791

Treatment and sprays are not included in the above table.

The dentist on duty at the hospital reports 1,439 affected teeth treated, with 3,499 sittings.

A large department laboratory is maintained for the use of the hospital and for the special work of the posts in the Western Department. The report of the work done will be found under the general head of "Laboratories."

The mean strength of the personnel on duty at this hospital for the year was: Officers, 12; dental surgeons, 2; Army Nurse Corps, 41; Hospital Corps, 158. There were 27 civilians employed by the Medical Department and 10 by the Quartermaster Corps on duty in the hospital during the year.

WALTER REED GENERAL HOSPITAL.

This is the general hospital at Washington, D. C., and also serves as post hospital for Washington Barracks, D. C., an autoambulance conveying the patients from the post at sick call and answering emergency calls.

Improvement of the grounds and roads has been maintained. There have been a number of minor improvements and additions. The commanding officer is of the opinion that the Government would be far better and more economically served by building quarters for all officers on duty there. There are only two sets of officers' quarters.

The number of cases admitted during the year, including retired officers, retired and discharged enlisted men, and civilians, was 984. Of this number, 120 were officers, 613 enlisted men, 30 retired officers, 17 retired and discharged enlisted men, 189 civilians, 3 members of the Army Nurse Corps, and 2 applicants for enlistment. Of these cases, 590 were medical and 394 were surgical. There were 93 remaining on sick report December 31, 1914, making a total of 1,044 admissions to be accounted for during the year. The daily average number of patients was as follows: Officers, 13.15; enlisted men, 54.70; retired officers, 1.63; retired and discharged soldiers, 2.18; Army Nurse Corps, 0.197; civilians, 9.26; and applicants for enlistment, 0.17.

The following table shows the movement of the sick, together with the principal causes of admission, during the calendar year 1914, civilians being included:

Remaining on sick report Dec. 31, 1913	60	
Admissions:		
For gunshot wounds	2	
For diarrhea and dysentery	7	
For malarial fevers	44	
For rheumatic affections	36	
For venereal diseases	107	
For injuries	74	
For insanity	21	
For alcoholism	18	
For all other causes	675	
Total admissions during the year		984
Total admissions to be accounted for		1,044
Dispositions:		
Total returned to duty	558	
Discharged for disability	51	
Discharged per expiration of term	13	
Deaths from all causes	20	
Transferred to other general hospitals	9	
Otherwise disposed of	291	
Transferred to Government Hospital for Insane	9	
Total dispositions during the year		951
Remaining on sick report Dec. 31, 1914		93
Total		1,044

There were 20 deaths. Of this number 2 were officers, 8 were enlisted men, 3 retired officers, 1 retired soldier, 5 civilians, and 1 Army Nurse Corps. The following were the causes of the deaths:

Carcinoma	4	Arteriosclerosis	2
Nephritis	4	Anemia	2
Pneumonia, lobar	2	Meningitis, tuberculous	1
Hemorrhage	1	Surgical shock, operation for nephrolithiasis	1
Tuberculosis of urinary bladder	1	Myocarditis	1
Appendicitis	1		

There were 51 men discharged on certificate of disability.

An active surgical clinic is maintained at this hospital. The following is a statement of surgical conditions for which operations were performed:

Hernia	16	Renal calculus	12
Cholelithiasis	3	Hemorrhoids	14
Vesical calculus	1	Varicocele	1
Fistula in ano	4	Fractures	5
Adenitis	14	Gynecological	51
Tumors	10	Diseases of ear	4
Diseases of eye	7	Diseases of mouth and pharynx	99
Diseases of nose	26	Other diseases of the genito-urinary system not specified	18
Other diseases of abdomen not specified above	18	Other diseases of skin and cellular tissue not specified above	15
Other diseases of the anus and rectum not specified above	2	Others	4
Other diseases of bones and organs of locomotion	24	Total	383
Appendicitis	45		

The following is a statement of the work done in the laboratory during the year:

Examinations of—	
Urine	3,609
Blood	791
Sputum	526
Feces	371
Stomach contents	42
Urethral discharges	345
Miscellaneous	266
Total	5,950

The average number of medical officers on duty during the year was 10; enlisted men, 6.87; and Army Nurse Corps, 23.

GENERAL HOSPITAL, FORT BAYARD, N. MEX.

This hospital is for the treatment of cases of pulmonary tuberculosis in the Army. Fort Bayard is situated in the southwestern part of New Mexico. The equable climate of Fort Bayard is due to the fact that it is surrounded on all sides except the north by lower and warmer regions. On the north the mountains rise to a height of 3,000 feet above the post, shielding it from the north winds, and these mountains are detached from the elevated regions of the upper Gila. All this makes for warmth, while the altitude and the fact that the warmest is also the most rainy and most cloudy period of the year makes for coolness. This nice interrelation of altitude, latitude, and location creates the almost unique climate of Fort Bayard and its immediate surroundings, constituting atmospheric conditions which afford adequate stimulation by variations of seasonal and diurnal temperatures and at the same time avoid harsh and great changes from heat to cold and the reverse which would unfavorably tax the resistance of the invalid.

The mean annual temperature for 1914 was 54.50.

No new buildings were constructed during 1914.

The number admitted during the year including beneficiaries of the Soldiers' Home, civilians and general prisoners, was 731, this being a decrease of 35 from the preceding year. There were 295 patients remaining December 31, 1913, making a total of 1,026 cases treated during the year. Of this number 30 were officers, 438 enlisted men, 477 beneficiaries of the Soldiers' Home, and 77 civilians. Of the number treated, 962 were medical cases and 64 were surgical. The daily average of officers was 7.84, enlisted men, 113.03; beneficiaries of the Soldiers' Home, 165.29; civilians, 15.90; general prisoners, 1.28; total, 303.34.

The tables following show the movement of the sick during the year, with the principal causes of admission and disposition.

	Officers, enlisted men, civilians, and general prisoners.	Beneficiaries of the soldiers' home.	Total.
ADMISSIONS.			
Injuries	28	.....	28
Pulmonary tuberculosis	255	320	575
Rheumatism, articular	2	.....	2
Cystitis	1	.....	1
Alcoholism	17	.....	17
Peritonitis, tuberculous	1	.....	1
Appendicitis	10	.....	10
Ankylostomiasis	1	.....	1
Tumors	2	.....	2
Pleurisy	6	.....	6
Otitis media	1	.....	1
Endocarditis, acute	2	.....	2
Venereal diseases	4	.....	4
Lightning stroke	1	.....	1
Laryngitis, tuberculous	2	.....	2
Mental insufficiency	1	.....	1
Other causes	77	.....	77
Total admissions in 1914	411	320	731
Remaining Dec. 31, 1913	138	157	295
Total to be accounted for	549	477	1,026
DISPOSITIONS.			
Returned to duty	173	.....	173
Died	38	28	66
Discharged for disability	133	.....	133
Discharged by expiration of term of service	12	.....	12
Otherwise disposed of	52	265	317
Total dispositions	408	293	701
Remaining Dec. 31, 1914	141	184	325
Total accounted for	549	477	1,026

Sixty-six deaths occurred during the year. Of this number, 4 were officers, 24 were enlisted men, 27 beneficiaries of the Soldiers' Home. Chronic pulmonary tuberculosis caused 50 deaths; lobar pneumonia, 1; tuberculous peritonitis, 1; tuberculous meningitis, 3; and several other diseases, 1 each.

Ninety-three surgical operations were performed during the year, all of which were successful. There were no deaths following operations.

The following is a condensed statement of the surgical conditions for which operations were performed:

Diseases:		Diseases—Continued.	
Nose	24	Mouth and pharynx	1
Eye	1	Neck and thorax	10
Abdomen	17	Anus and rectum	8
Genito-urinary system	10	Bones	6
Tumors	3	Miscellaneous	3

The laboratory work of the year may be itemized as follows:

Examinations of sputum	7,552	Miscellaneous examinations	73
Examinations of urine	1,015	Autopsies, human	59
Examinations of blood	309	Autopsies, bovine	45
Wassermann's tests	44	Histological examinations	787
X-ray examinations and photography	628		

The number of completed cases of pulmonary tuberculosis in 1914 was 437. Important complications were present in 180 cases, as follows:

Tuberculous laryngitis	70	Nephritis, chronic interstitial	2
Otitis media	27	Mitral regurgitation	2
Syphilis, tertiary	22	Arthritis, tuberculous	2
Tuberculous fistula in ano	12	Aneurism, aortic	2
Tuberculous pleurisy, serous	10	Sarcoma, bronchiectasis, tuberculous nephritis, diffuse nephritis, ankylostomiasis, chronic gastritis, arteriosclerosis, aortic disease, and paranoia (each)	1
Tuberculous entero-colitis	9		
Syphilis, secondary	7		
Pneumo-thorax, artificial	7		
Bronchitis, chronic	7		
Nephritis, chronic parenchymatous	6		
Meningitis, tuberculous	5	Total complications	215
Pyopneumothorax	5	Less number of cases with more than one complication	35
Spondylitis, tuberculous	4		
Asthma, bronchial	4	Total cases with complications	180
Peritonitis, tuberculous	3		

The following table shows the result of treatment in all cases of pulmonary tuberculosis:

Class.		Apparently cured.		Arrested.		Apparently arrested.		Quiescent.		Improved.		Unimproved.		Died.	
	Number.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.
Incipient	63	4	6.35	20	31.75	15	23.80	12	19.04	8	12.70	4	6.35	....	....
Moderately advanced	317	30	6.62	38	12.00	26	8.20	101	31.90	86	27.13	31	9.80	5	1.57
Far advanced	367	5	1.37	5	1.37	1	.27	63	17.16	128	34.89	111	30.24	54	14.71
Acute miliary	1	....	....	....	....	....	....	....	....	....	....	....	....	1	100.00
Total	[1]748	39	5.21	63	8.42	42	5.61	176	23.53	222	29.68	146	19.51	60	8.02

[1] Includes 22 cases under treatment less than 1 month.

The result of treatment in completed cases [1] of pulmonary tuberculosis was as follows:

Class.		Apparently cured.		Arrested.		Apparently arrested.		Quiescent.		Improved.		Unimproved.		Died.	
	Number.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.
Incipient	36	2	5.55	17	47.25	6	16.67	3	8.33	5	13.89	3	8.33	....	....
Moderately advanced	176	21	11.93	28	15.91	13	7.39	36	20.45	48	27.27	25	14.20	5	2.84
Far advanced	224	3	1.34	5	2.23	....	....	37	16.51	70	31.25	55	24.55	54	24.11
Acute miliary	1	....	....	....	....	....	....	....	....	....	....	....	....	1	100.00
Total	437	26	5.95	50	11.44	19	4.35	76	17.39	123	28.14	83	18.94	60	13.79

[1] By "completed cases" are meant all cases which have terminated their connection with the hospital in any way.

The mean strength of the personnel on duty during 1914 was as follows:

Officers (medical officers and chaplain)	10.31
Other officers (patient officers on light duty)	2.40
Post noncommissioned staff	2.65

Detachment Quartermaster Corps	27.42
Detachment Hospital Corps [1]	117.05
Army Nurse Corps	20.47

ARMY AND NAVY GENERAL HOSPITAL, HOT SPRINGS, ARK.

This hospital was originally intended especially for patients having diseases in which hydrotherapeutic treatment is indicated. Paragraph 1441, Army Regulations, 1913, states that—

> The Army and Navy General Hospital, Hot Springs, Ark., is under the direction of the Secretary of War and is devoted to the treatment of the officers and enlisted men of the military and naval service of the United States, cadets at the United States Military and Naval Academies, officers of the Revenue-Cutter Service, officers of the Public Health Service, and honorably discharged soldiers and sailors of the Regular and Volunteer Army and Navy of the United States, for such diseases as the waters of the hot springs of Arkansas have an established reputation in benefiting.

This hospital has served in part as a general hospital for the Southern Department and for the Second Division.

A new ward is under construction.

During the year 785 cases were admitted. Of this number 28 were officers, 113 enlisted men, 8 retired officers, 28 retired enlisted men, and 608 civilians, chiefly veterans of the Civil War, admitted in accordance with the law. The daily average was 96.90.

The following tables show the principal causes of admission and method of disposition of all cases:

Remaining in hospital Dec. 31, 1913	87
Admissions:	
Alcoholism	8
Diseases of the respiratory system	11
Diseases of the heart	25
Diseases of the urinary system	29
Dysentery	1
Myalgia	11
Rheumatism, articular	90
Rheumatism, muscular	10
Sprains and muscular strains	5
Gastritis	11
Hernia, inguinal	10
Appendicitis	4
Diseases of the kidneys	24
Arthritis	6
Syphilis and results	73
Gonorrhea and results	24
Carcinoma (stomach, 2; kidney, 1)	3
Diseases of the circulatory system	152
Malarial affections	6
Pulmonary tuberculosis	6
All other causes	276
Total	872
Dispositions:	
Returned to duty	119
Died	13
Discharged on certificate of disability	3
Transferred	2
Discharged from hospital (civilians)	615
Otherwise disposed of	3
Remaining in hospital December 31, 1914	117
Total	872

[1] Including an average of 5.6 patients under treatment for tuberculosis, carried as members of the command but not included in the authorized strength.

DEATHS.

Thirteen deaths occurred during the year, including three enlisted men on the active list of the Army, from the following causes:

Civilians:	
Angina pectoris	1
Myocarditis, chronic	1
Postoperative shock, following prostatectomy	1
Bronco-pneumonia	1
Pernicious anemia	1
Postoperative shock and pulmonary congestion following operation for left inguinal hernia	1
Pellagra	1
Cirrhosis, atrophic, hepatic, chronic	1
Suppression of urine and cardiac failure, following operation for prostatic hypertrophy	1
Exhaustion due to ptomaine poisoning	1
Total civilians	10
Soldiers:	
Nephritis, parenchymatous, chronic	1
Tuberculosis of the mesenteric glands	1
Endocarditis, chronic, and valvulitis, chronic, post rheumatic	1
Total soldiers	3

There were three discharges on surgeon's certificate of disability. The following is a list of the causes:

Sciatica, chronic, left	1
Aphonia, following measles	1
Syphilis, tertiary, intractable, and psychasthenia	1
Total disability discharges	3

Almost all of the surgical work is done on the ex-soldiers and volunteers, for very little, if any, work of an operative nature is sent to this hospital by transfer. The operating room has been equipped with many new instruments and appliances for general surgery, as well as for eye, ear, nose and throat work. The following is a résumé of the surgical conditions for which work was done during 1914:

Tonsillectomy	9	Gastroenterostomy	1
Herniotomy	7	Cholecystotomy	1
Appendectomy	4	Epididymectomy	1
Prostatectomy	3	Amputation outer third penis	1
Incision and drainage	3	Excision of hemorrhoids	1
Extraction	2	Excision of cupal bones and lower extremities of radials, right wrist	1
Resection, submucous	2	Amputation of right hand	1
Bassini's radical cure	2	Bone transplantation (Abbe's method)	1
Excision	2		
Incision and curettage	1	Total	45
Vasectomy	1		
Appendectomy and gastroenterostomy	1		

The following is an abstract of the laboratory work done during the year 1914:

Wassermann's	425	Autopsies	7
Stomach analyses	10	Urine	1,160
Bacteriological examinations	10	Tissues, sectional	6
Feces	33	Luetin tests	158
Blood examinations	60	Urethral smears	13
Widal tests	1	Vaccines	4
Milk examinations (fat and bacteriological determinations)	36	Spinal fluid examinations	10
Sputa	16	Total	1,959
Phenolsulphonephthalein tests for renal efficiency	10		

Personnel on duty at hospital.—The mean daily strength of the personnel on duty during the year was as follows:

Medical officers	4.44
Post noncommissioned staff	1.00
Hospital Corps and Quartermaster Corps	63.19
Army Nurse Corps	5.98
Mean aggregate	74.61

DEPARTMENT HOSPITAL, MANILA, P. I.

This hospital is the general hospital for the Philippine Islands. It differs from the general hospitals in this country in that it is not directly under the control of the Surgeon General, but owing to its geographic location it is under the authority of the department commander.

The new construction mentioned in the last report has been completed. During the year there was an allotment made for the construction of an addition over the officers' ward to serve as accommodation for women and children. An elevator is to be installed.

During the year 2,331 cases were admitted. Of this number 128 were officers, 1,312 enlisted men (Americans), 211 Philippine Scouts, and 680 civilians. Of the entire number, 1,579 were classed as medical cases and 752 as surgical. The daily average number of patients was 120.74. Of this number 7.38 were officers, 69.75 enlisted men (Americans), 16.65 Philippine Scouts, and 26.96 civilians.

The following table shows the movement of the sick, together with the principal causes of admissions during the year 1914:

Cause.	Officers.	Enlisted men (American).	Philippine Scouts.	General prisoners.	Civilians.
ADMISSIONS.					
Gunshot wounds	.....	8	10	.....	.....
Diarrhea and dysentery	2	22	2	.....	15
Malarial fevers	20	65	30	.....	20
Typhoid fever	.....	[1] 1	[1] 2	.....	[2] 10
Rheumatic affections	4	11	7	.....	7
Venereal diseases	1	220	34	.....	16
Injuries	18	163	15	.....	90
Insanity	1	66	8	1	3
Alcoholism	3	65	1	.....	4
All other causes	79	691	102	.....	514
Total	128	1,312	211	1	679
DISPOSITIONS.					
Returned to duty	89	981	171	.....	9
Discharged on certificate of disability	.....	[3] 1	40	.....	.....
Discharged per expiration of enlistment	.....	3	3	.....	.....
Deaths, all causes	.....	7	.....	.....	14
Transferred to other hospitals	33	326	3	1	11
Otherwise disposed of	3	1	3	.....	647
Deserted	.....	1	.....	.....	.....
Total	125	1,320	220	1	681

[1] Paratyphoid "B." [2] 6 typhoid fever, 4 paratyphoid "B." [3] Filipino member of American band.

Total admissions during the year	2,331
Remaining on sick report December 31, 1913	113
Total to be accounted for	2,444
Total dispositions during the year	2,347
Remaining on sick report December 31, 1914	97

There was no case of typhoid fever treated in this hospital during the year. Twenty-one deaths occurred, as compared with 16 in 1913.

The following table shows the deaths with causes:

Cause.	Officers.	Enlisted men (American).	Philippine Scouts.	Civilians.
Abscess of the liver		1		
Acute peritonitis		2		2
Cardiac dilatation		1		1
Cardiac dilatation and broncho-pneumonia				1
Cellulitis, acute, suppurative, neck, bilateral				1
Eclampsia and pulmonary edema				1
Endocarditis, acute, septic				1
Entercolitis, entamebic, chronic		1		
Ether, anesthesia and operative shock		1		
Extensive burns, body, face and extremities				1
Fracture of skull		1		
Fractures, 2d, 3d, 4th, 5th, 6th, and 7th ribs, complicated with pleurisy and broncho-pneumonia				1
Gangrenous gut				1
Nephritis and cellulitis, acute suppurative, right leg and thigh				1
Pneumonia, lobar, acute				1
Pyonephrosis				1
Uremia				1
Total		7		14

Aggregate, all classes, 21.

American soldiers are not discharged for disability in the Philippine Islands, except in very rare cases; there were four discharged there in 1914. All the native enlisted men physically disabled for service are discharged in the islands. The following table shows the number discharged at this hospital during the year, with causes:

Ambylopia, partial, right eye	1
Arthritis, chronic, right knee	1
Arthritis, tubercular, chronic, right hip	1
Constitutional psychopathic state	1
Defective mental development	5
Dementia precox	1
Leprosy	1
Lymphadenitis, acute, suppurative, tuberculous, glands of neck	1
Neuritis, chronic, both legs	1
Optic atrophy, consecutive, bilateral	1
Pailloma of bladder	1
Tuberculosis, pulmonary, chronic	20
Tuberculosis, pulmonary, and of the larynx, chronic	1
Tuberculosis of the abdomen	1
Amputation of left ring and little fingers (G. S. W.)	1
Tuberculosis of left hip joint	1
Wounded in action:	
Limitation of function, left leg and thigh (G. S. W.)	1
Partial paralysis, left leg (G. S. W.)	1
Total	41

In 1913 there were 48 discharged for disability at this hospital.

An active surgical clinic is maintained. The following is a condensed tabular statement of surgical operations during the calendar year 1914:

Operations.	Officers.	Enlisted, except Philippine Scouts.	Philippine Scouts.	Total.	Army Nurse Corps.	Civilians.	Grand total.
Cranium						1	1
Eye	15	18		33		22	55
Ear	8	27	2	37		10	47
Nose	3	19		22		21	43
Throat	5	39		44		39	83
Face	1	6	3	10		3	13
Neck		4	1	5			5
Upper extremity		11	3	14		9	23
Thorax		2	1	3		5	8
Abdomen (laparotomy)	12	51	4	67	2	80	129
Gynecological:							
External						75	75
Internal					2	56	58
Lower extremity	9	19	2	30		4	34
Major (not included)	3	3		6		6	12
Minor (not included)	4	20	5	29		40	69
Total	60	219	21	300	4	351	655

No operations on retired officers and enlisted men.

Operations of eye and ear clinic are here shown to complete the table, although it is a separate service.

In the eye, ear, nose and throat department 228 operations were done. There were 55 deliveries at term in the obstetrical department, with 4 stillbirths.

The following is a report of the hospital laboratory work during the year:

Examinations of—		Examinations of—	
Blood	4,670	Wassermann reactions	3,135
Feces	3,596	Urine	3,995
Sputum	3,386	Smears and cultures	1,585
Pathological sections	186	Autopsies	16
Animal injections	21	Chemical, biological, and miscellaneous examinations	1,173

A dental service was maintained throughout the year. The average number of medical officers on duty was 11; dental surgeons, 2; Hospital Corps men, 86; Army Nurse Corps, 24.

DEPARTMENT HOSPITAL, HONOLULU, HAWAII.

General Orders No. 12, Headquarters Department of Hawaii, October 31, 1913, specified that—

The hospital located on the Fort Shafter Military Reservation will be known as the department hospital.

On account of its geographical location this hospital is governed in the same way as the department hospital at Manila, P. I.

This hospital has grown around a 12-bed post hospital built in 1906. It was first expanded in 1912 when three 2-story ward wings were built. In 1913 the dining room was remodeled and a new kitchen constructed. During the current year construction was commenced upon three additional ward wings, an operating pavilion, an isolation building, and a dormitory for the Hospital Corps detachment. When ready for occupancy these buildings will increase the capacity of the hospital to 250 beds. It will not be possible to further expand the wards because of lack of ground.

Two detached sites for buildings remain which it is proposed to utilize for a receiving and clinic building and for a nurses' home. Plans for these buildings were forwarded under date of September 19, 1914.

With the expansion to 250 beds the messing facilities of the hospital will again become inadequate, the kitchen being hardly large enough for the hospital at its present size. Its equipment is no more than that usually found in a company kitchen. There is no diet kitchen, nor is there room for one in the building.

Quarters for medical officers and for noncommissioned officers are needed, there being but one set of the latter pertaining to the hospital. Medical officers occupy rented quarters in Honolulu.

The commanding general has recommended the acquisition of a tract of ground adjoining the hospital on the west with a view to the erection of quarters for medical officers.

Minor improvements during the year have been the construction of a garage, a concrete refrigerator, and a delivery platform for supplies, the inclosure of the front porch of the administration building, and the installation of a gas supply for all heating purposes.

The hospital acts as a post hospital for all posts in the department, operative cases and all sick liable to remain in bed over one week being transferred to it. Serving as it does a garrison of about 8,000 troops, the work of the hospital is extensive and varied. During the past year work in all the departments has increased in amount, more especially in the surgical and women's wards.

During the year 1,820 cases were admitted. Of this number, 27 were officers, 1,644 enlisted men, and 149 civilians. The daily average number of patients was 80.42.

The following tables show the principal causes of admission and method of disposition of all cases:

Admissions.

Gunshot wounds	6
Diarrhea	10
Malaria	5
Typhoid	0
Rheumatic affections	42
Venereal	363
Injuries	309
Insanity	41
Alcoholism	40
All other causes	1,004
Total	1,820
Remaining in hospital Dec. 31, 1913	64
Total to be accounted for	1,884

Disposition.

	Officers and enlisted men.	Civilians.	Total.
Returned to duty	1,509		1,509
Died		3	3
Discharged per expiration of term	1		1
Transferred to other hospitals	146	1	147
Otherwise disposed of		143	143
Total	1,656	147	1,803

Three deaths occurred, one of convulsions, one of toxaemia, and one of a prematurely born infant, due to inanition, all civilians.

There was no discharge in hospital.

The surgical work done at this hospital has been varied and extensive, as shown by the following table:

Operations.	Officers and enlisted men.	Civilians.	Total.
Cranium	6	1	
Eye	7	1	
Nose	6	6	1
Throat	21	25	4
Neck	3	2	
Upper extremity	14	.....	1
Thorax	1	.....	
Abdomen	76	38	11
Anus and rectum	33	3	3
Lower extremity	18	3	2
Gynecological	.....	11	1
Genito-urinary	48	8	5
Minor (including hernia)	6	.....	
Total	239	92	33

Included in the above list are 45 operations for appendicitis, 4 for hernia, and 30 for hemorrhoids. Of the operations, 328 are classified as successful and 2 as partially successful; 1 was followe by death. The death resulted from toxemia, following intestina obstruction.

An obstetrical service was inaugurated during the year and 1 women were delivered at term.

The following is an abstract of the laboratory work done during the year 1914. In June, of 1914, it became a department laboratory and has since done work for all posts in the department.

Urines	2,190	Blood cultures	1
Blood counts	337	Animal inoculations	4
Sputum	426	Milk, bacterial examinations	1
Feces	117	Dark-field examinations	3
Urethral smears	207	Alcohol determination	
Milk-fat estimate	33	Medico-legal tests	
Butter examinations	2	Water analysis, chemical	
Throat cultures	204	Malarial hunts	1
Throat smears	23	Autogenous vaccines	4
Stomach contents	107	Autopsies	
Bacterial examinations	60	Chemical tests	
Wassermann's	1,376		
Water, bacterial analysis	27	Total	5,29
Tissue sectioning	10		

The mean strength of the personnel on duty at this hospital fo the year was as follows:

Medical officers	7.5
Hospital Corps	74.5
Army Nurse Corps	9.2
Aggregate	81.2

PROVIDENCE HOSPITAL.

The act approved August 1, 1914, having appropriated $19,000 for support and medical treatment of destitute patients in the city of Washington, D. C., under a contract to be made with Providence Hospital by the Surgeon General of the Army for relief afforded, was as follows:

Patients in hospital July 1, 1914	98
Admitted during the year	1,427
Total number treated	1,525
Average number admitted per month	127
Number remaining in hospital June 30, 1915	95
Total number of days' treatment afforded	34,813
Average number of days' treatment per patient	23
Average number of patients treated per day	95
Longest term of treatment (days)	365
Shortest term of treatment (days)	1
Number of patients in hospital during the whole year	2

LABORATORIES.

A laboratory is provided for each of the departments, the one at the Army Medical School, Washington, D. C., for the use of the Eastern Department; at Fort Leavenworth, Kans., for the Central Department; at the Letterman General Hospital for the Western Department, and at Fort Sam Houston for the Southern Department. The laboratory of the tropical board has become a department laboratory for the Philippine Department, and one was established at Honolulu in connection with the department hospital for the work in that department.

Army Medical School.

BACTERIOLOGICAL DIVISION.

No changes of importance have been made in the bacteriological laboratories during the past year. The work has been of a varied character, as shown in the following summaries:

TYPHOID FEVER PROPHYLACTIC.

Vaccine prepared in the laboratory was distributed during the 6 months' periods as follows:

	1914		1915, June 30.
	June 30.	Dec. 31.	
	C. c.	*C. c.*	*C. c.*
Army	127,354	104,982	107,823
Navy	46,626	36,273	48,528
National Guard	52,011	18,983	11,709
Various Government departments	1,692	1,758	1,152
Red Cross	.....	25,000	.....
Civilians and civilian institutions	628	1,390	1,082
	228,311	188,386	170,294

No changes have been made in the preparation of the prophylactic, since our results with the vaccine at present in use have been all that could be desired.

Miscellaneous vaccines prepared and distributed to Army posts during the six months' periods.

	1914		1915, June 30.
	June 30.	Dec. 31.	
Gonococcus:	*C. c.*	*C. c.*	*C. c.*
Prepared	1,622	2,245	1,700
Distributed	1,298	1,428	1,906
Staphylococcus:			
Prepared	1,063	640	280
Distributed	803	553	589
Streptococcus:			
Prepared	225	525	575
Distributed	145	257	383
Staphyloccus-acne:			
Prepared	830	1,010	383
Distributed	497	456	666
Pyorrhoea:			
Prepared	200	.....	.....
Distributed	42	12	.....
Autogenous prepared and distributed	30	37	23
Bile media distributed to Army posts.....bottles	.....	337	407

Summary of clinical laboratory examinations of typhoid fever cases.

	Six months' periods ending—		
	1914		1915, June 30.
	June 30.	Dec. 31.	
Examinations of typhoid cases	84	150	164
Convalescents examined:			
Positive	0	0	0
Negative	2	4	11
Suspected carriers or contacts examined:			
Positive	4	6	9
Negative	32	58	38
Widals:			
Positive	4	4	12
Negative	20	46	74
Blood cultures:			
Positive	1	5	2
Negative	15	30	22
Blood cultures from clots:			
Positive	0	0	0
Negative	8	7	4
Examination of feces for b. typhosus:			
Positive	1	2	0
Negative	18	31	24
Examination of urine for b. typhosus:			
Positive	0	0	0
Negative	14	31	12
Examination of feces for b. dysenteria:			
Positive	0	0	0
Negative	3	3	5

No chronic bacillus carriers were detected during the fiscal year ending June 30, 1915.

As there are only a few cases of paratyphoid fever reported yearly, it has not seemed necessary, at least in our service, to use a mixed typhoid and paratyphoid vaccine, and none has been used.

Summary of clinical laboratory examinations.

	Six months' periods ending—		
	1914		1915, June 30.
	June 30.	Dec. 31.	
Blood counts:			
Red	47	66	92
White	64	82	94
Differential counts	59	75	98
Malaria:			
Positive	2	8	1
Negative	38	100	114
Blood cultures:			
Positive	0	0	0
Negative	5	10	4
Urinalyses	102	126	88
Sputa for tubercle bacilli:			
Positive	2	3	7
Negative	29	29	72
Feces for parasites, etc	45	30	36
Water, bacteriological	12	42	45
Cultures of pus, exudates, etc	65	69	96
Animal inoculations for immune sera, etc	184	84	299
Histological examinations of operative and post-mortem tissues	262	197	210
Miscellaneous examinations, gonococcus, etc	151	192	174
Wassermann examinations	5,774	5,268	5,567
Positive	377	204	240
Negative	688	601	510
Reexaminations	1,383	905	968
Tests made on survey	3,326	3,558	3,849
Examinations for treponema pallidum:			
Dark field microscope—			
Positive	18	14	6
Negative	34	21	28
Staining—			
Positive	1	3	2
Negative	0	2	0
Examinations for trypanosomes	920	380	50
Examinations for coli bacilli	0	30	0
Treatments with salvarsan	2	10	13
Treatments by bacterial vaccines	193	74	88
Luetin tests	0	0	18
Spinal fluid:			
For Noguchi	6	6	211
For tubercle bacilli, positive	0	1	0
Lange's test	0	2	209
For cell count	0	0	195
Spinal puncture	0	0	1
Rabies	0	0	2
Milk	5	21	20
Gonococcus fixation tests	22	32	30
Diphtheria:			
Positive	4	5	0
Negative	18	8	0

REPORT UPON WASSERMANN TESTS.

The Wassermann reaction has been performed continuously as a diagnostic test for syphilis and a guide in the treatment. During the year ended June 30, 1915, the total number of Wassermann tests in the laboratory was 10,835, of which 1,873 were reexaminations; 7,407 made on Wassermann survey; and 1,555 examinations of new cases. Of the latter, 588 were of syphilis or suspected syphilis, and 967 were from cases suffering with diseases other than syphilis. In addition there were 91 tests made for gonococcus fixation; 164 spinal fluids in three dilutions; and 8 titrations of sera previously reported double plus.

The following table shows the actual results obtained in known syphilitics:

Stage of disease.	Number of cases.	Positive.	Negative.	Per cent positive.
Primary	115	60	55	52.17
Secondary	159	148	11	93.08
Tertiary	204	165	39	80.88
Latent	109	70	39	64.22
Hereditary	1	1	0	100.00
Total	588	444	144	75.51

WASSERMANN SURVEY.

With regard to the Wassermann survey referred to in last year's report, it may be said that this work has been continued systematically, with the result that approximately 10,000 Wassermann reactions have been performed for the purpose of determining the prevalence and distribution of syphilis in the Army. The results of this work have been published as Bulletin No. 8, Office of the Surgeon General. Certain groups in the civilian communities are now being studied in a similar way, and it is hoped that in the course of several years much valuable information may be obtained with regard to the prevalence of syphilis among the general population.

CHEMICAL DIVISION.

During the fiscal year ended June 30, 1915, 17 analyses of water from various Army posts were made in this laboratory. There were 6 examinations of women's milk and 32 of cows' milk.

X-RAY LABORATORY.

In this laboratory the work done in addition to instruction is represented by the following table:

X ray:	
Radiographs	5,425
Dental films	1,341
Photomicrographs	62
Photographic:	
Negatives	865
Prints	2,114
Lantern slides	1,006
Moving-picture film developed.....feet..	1,200

The facilities of this school indicate the desirability of detailing officers of the Medical Corps of the Army to come here for special courses of instruction. This matter has been taken up and an endeavor made to arrange the details of their transportation, and their quartering in the city of Washington. Recommendations have also been made by the faculty concerning the courses of instruction to be given such officers. It is hoped that in the near future this can become a regular part of the scheme of instruction for medical officers of the Army.

Fort Leavenworth, Kans.

Capt. Charles F. Craig, Medical Corps, has been in charge during the year and reports in part as follows:

The department laboratory of the Central Department of the United States Army has been in operation throughout the year, and although most of the troops have been absent from the department, by reason of official orders, during this time there have been 7,059 examinations made in the laboratory, which will be found tabulated below. The fact that over 7,000 examinations have been requested of this laboratory during the year despite the absence of troops from the department proves the necessity of maintaining department laboratories in operation without reference to the presence or absence of troops.

From January 1, 1913, to December 31, 1914, the following examinations were made in this laboratory:

Blood, for malaria plasmodium (positive, 4)	120
Erythrocyte counts	51
Leucocyte counts	88
Differential leucocyte counts	72
Urine examinations:	
Chemical	648
Microscopical	571
Sputum examinations for *B. tuberculosis* (positive, 2)	78
Dark field examinations for *T. pallidum* (positive, 4)	28
Smears for gonococci (positive, 42)	60
Agglutination test for *B. typhosus* (positive, 2)	14
Throat cultures for *B. diphtheriae* (positive, 6)	28
Blood cultures:	
For *B. typhosus* (positive, 2)	6
For paratyphoid bacilli (positive, 1)	8
For other bacteria	25
Feces:	
For *B. typhosus* (positive, 1)	6
For entamoebae (*E. histolytica*) (positive, 2)	24
For occult blood	21
Stomach contents, chemical analysis	36
Autogenous vaccines prepared	24
Inoculations of animals	34
Inoculations of immune sera	18
Water, bacteriological examinations of	75
Milk:	
Chemical examinations of	157
Bacteriological examinations of	150
Antityphoid inoculations	841
Smallpox vaccinations	177
Treatments with vaccines	201
Autopsies	3
Wassermann tests	3,483
Total	7,059

Typhoid examinations.—During the year there have been only six requests made for the examination of blood cultures, urine, or feces in suspected typhoid infections. Of the six infections, one proved positive for typhoid and one for paratyphoid fever. The case of typhoid was in the person of a recruit who had not received the typhoid prophylactic owing to the fact that he was taken sick with the disease one day after enlisting.

Wassermann tests.—During the year 3,483 Wassermann tests have been made in this laboratory, of which 2,470 were reexaminations either for the purpose of controlling the treatment of syphilis or for experimental purposes, while 1,013 were made upon new cases. Of the latter, 511 were diagnosed as syphilitic or suspected of having this disease because of the symptoms present, while 254 were diagnosed as suffering from some other disease than syphilis. The blood sera of 248 normal individuals were tested during the course of some experimental work, in addition to the two classes of cases already mentioned.

Of the 511 cases diagnosed as syphilitic or suspected of the disease because of the symptoms present, 437, or 85.5 per cent, gave a positive reaction with the Wassermann

test. Of the 254 individuals diagnosed as suffering from diseases other than syphilis, one gave a weak (plus) reaction with the test. In this case the reaction occurred during a febrile paroxysm of tertian malarial fever and the blood became negative upon the subsidence of the fever.

The percentage of positive results obtained in the various stages of syphilitic infection, in the 511 cases tested during the year, was as follows:

Stage of disease.	Total cases.	Positive.	Negative.	Per cent positive.
Primary	78	70	8	89.7
Secondary	140	136	4	97.1
Tertiary	50	44	6	88.8
Latent	243	187	56	76.9
Total	511	437	74	85.5

The provocative Wassermann test.—The provocative Wassermann test has been used but very little in the Army, either in the diagnosis of syphilis or as a means of ascertaining the result of therapuetic measures, if the experience of this laboratory is any criterion of the use of this test in the service. There have been just six provocative tests requested of the laboratory during the year, although there must have been numerous instances in which this test could have been used to advantage either in the diagnosis or as a guide to the treatment of syphilis.

The test is easily applied, consisting only in the administration of a small dose of salvarsan, and the collection of a suitable specimen of the patient's blood every day for at least a week, and sending it to the laboratory for the Wassermann test, and it is of such great value both in diagnosis and therapeusis that it should be much more frequently employed. Its use in diagnosis especially has been overlooked. The administration of a small dose of salvarsan or neosalvarsan to individuals suspected of syphilis and in whom the ordinary Wassermann reaction is negative, often results in the occurrence of a positive reaction and thus establishes the diagnosis.

The complement fixation test for gonorrheal infections.—Early in the year the chief surgeon of the department, at the request of the officer in charge of this laboratory, issued a circular notifying the medical officers serving in the Central Department that the laboratory was prepared to make the complement fixation test for gonorrheal infections but to date only a very few requests have been made for the test, although it is believed that many cases in which this valuable diagnostic aid would have been of service must have occurred among the soldiers serving in the department. It is now a well established fact that a positive reaction with this test means gonorrheal infection, and the test has been found of great value in differentiating the chronic arthritides, chronic suppurative processes, and endocardial disease due to gonococcus. It was hoped that enough data would have been accumulated by the end of this calendar year to enable a report to be made upon the value of the test to the military service, but so few requests have been received that it is impossible to render such a report.

Complement fixation in the diagnosis of tuberculosis.—For several months the officer in charge has been conducting experiments upon the use of complement fixation in the diagnosis of tuberculosis and it is believed that a method has been worked out that will prove of value in the diagnosis of active tubercular infections, and which will enable us to separate from such infections those that are inactive and probably cured. A great amount of work has been expended upon this subject but the results have been so contradictory heretofore that the methods advocated, with the exception of that of Besredka, have not been considered of any great diagnostic value. The method of applying the test, as worked out in this laboratory, depends for its success upon the employment of an antigen prepared from several strains of the human tubercle baccillus grown upon a special medium, and it is believed that it will prove of great value in that a positive result with the method apparently demonstrates the presence of an active tubercular infection, even though the clinical symptoms are so slight as to be considered absent, thus enabling one to differentiate really cured infections from those that are merely inactive from a clinical standpoint. It has long been considered that the antibodies upon which complement fixation must depend in this disease occur only when the infection is clinically active and for this reason the tests advocated to date have not been of much service, even where positive results have been obtained, because the clinical symptoms were sufficient to establish the diagnosis, but with the method experimented with it is possible to demonstrate complement fixing antibodies in the blood serum of patients in whom the disease is clinically inactive and apparently cured, which of course greatly increases the value of the test in the diagnosis of tuberculosis.

Letterman General Hospital.

Capt. Corydon G. Snow, Medical Corps, has had direct charge of the pathological laboratory during the year. It is reported that—

Capt. Snow has devised a method of performing the Wassermann test, which practically eliminates all danger of false positives and at the same time enables one with almost mathematical precision to read the reactions as: Plus, plus; plus: plus, negative, or negative, as the case may be. The technique, briefly, is as follows:

Extensive experiments have been made in the diagnosis of syphilis, by spinal fluid and blood serum examination, and as a result a complement fixation test has been devised whereby a quantitative reading may be made with reasonable accuracy, which, in the control of treatment cases, had proven valuable. Blood serum, following inactivation, is diluted and saturated with red cells to remove any natural amboceptor that may be present. The dosage of all ingredients is so adjusted by accurate titration that there can be no surplus. Free amboceptor is replaced by sensitized red cells. Five tubes are used for each sera, the first three containing antigen, the other two being control tubes—the fifth containing no amboceptor. The results are read on a standardized scale, which, to a large extent, eliminates doubt as to the strength of the reaction.

In cases of locomotor ataxia and cerebrospinal syphilis we have employed for the first time this year salvarsanized serum intraspinally. While the number of patients treated has been small (four) the results obtained have been gratifying, and we believe worthy of further trial. No untoward symptoms followed any of the treatments, and in two cases marked and decisive improvement occurred. It would, of course, be premature to venture an opinion as to whether the results will be permanent.

Record of examinations, pathological, bacteriological, and chemical laboratories, calendar year, 1914.

Blood examinations	596	Water examinations:	
Urine examinations	3,945	Chemical	27
Sputum examinations	1,755	Bacteriological	168
Feces examinations	336	Tissue examinations	88
Stomach contents	62	Autogenous vaccines made	68
Transudates and exudates	12	Typhoid prophylaxis doses given	240
Spinal fluid examinations	73	Animal immunization and inoculations	63
Cultures	244	Autopsies performed	23
Wassermann reactions	1,753	Typhoid examinations:	
Luetin reactions made	242	Urine	6
Special serum reactions	247	Blood cultures	6
Special diagnostic reactions	38	Feces	6
Smear examinations	526	Widal	12
Chemical examinations, food, malt, milk, etc	54	Miscellaneous	14

Fort Sam Houston, Tex.

Capt. Clarence L. Cole, Medical Corps, officer in charge, reports in part, as follows:

VACCINES.

Marked success has apparently followed the use of vaccines in cases of furunculosis. The use of these vaccines has, with a few exceptions, been limited to the base hospital, Fort Sam Houston, Tex. It is believed a more general use throughout the department would give gratifying results.

The use of other vaccines has been too limited to form any definite conclusions.

Miscellaneous vaccines prepared.

Autogenous:	Cubic centimeters
For furunculosis, pyorrhea alveolaris acne, and other infections	1,680
Staphylococcus (stock)	400

Summary of clinical laboratory examinations of typhoid and undetermined fevers.

Widal:	
Positive	24
Negative	84
Blood cultures:	
Positive	0
Negative	38
Feces:	
Positive	1
Negative	31
Urine:	
Positive	0
Negative	18
Gall bladder:	
Positive	0
Negative	3

BLOOD COUNTS.

The value of blood counts, especially the leucocyte and differential count in the clinical diagnosis of cases, have been repeatedly emphasized in the work at the base hospital.

Summary of clinical laboratory examinations for 12 months.

Blood counts:	
Red	104
White	377
Differential counts	400
Haemoglobin estimations	270
Malaria:	
Positive	48
Negative	249
Urethra smears for gonococcus	175
Urinalyses	1,864
Sputa for tubercle bacilli:	
Positive	20
Negative	456
Feces for parasites, etc	178
Water, bacteriological	18
Cultures of pus, exudates, etc	12
Animal inoculations for amboceptor, etc	163
Histological examinations of operative and post-mortem tissues	75
Wassermann examinations:	
Positive	1,222
Negative	3,463
Examinations for treponema pallidum, dark field microscope:	
Positive	31
Negative	49
Preparation of autogenous salvarsanized serum	12
Luetin tests	4
Examinations for diphtheria:	
Positive	18
Negative	96
Spinal fluid:	
Wassermann tests—	
Positive	29
Negative	64
For cell count	35
For Nogouchi—	
Positive	16
Negative	20
For meningococcus—	
Positive	1
Negative	0

Milk:	
Mother's	4
Cow's	3
Autopsies performed	9
Miscellaneous examinations	142
Slides, microscopical, added to cabinet during the year	505

URINE ANALYSIS.

In this laboratory all urine is examined both chemically and microscopically. The value of the latter examination is fully as great as that of the former one, for many cases of chronic, interstitial nephritis pass into a stage in which it is impossible to demonstrate the presence of albumen chemically, yet almost invariably casts will be found. The value of the microscopical examination has been greatly emphasized during the past year in a great number of tests which have been made on the urine of soldiers prior to the administration of salvarsan alone, of salvarsan and mercury combined, and mercury alone. It appears from these examinations that subsequent to the administration of salvarsan, either alone or combined with mercury salicylate, salvarsan intravenously and mercury salicylate intramuscularly, a moderate degree of kidney irritation supervenes. This is manifested by the appearance in the urine, about 48 hours after injection, of hyaline casts, no albumen. These casts disappear within about a week. On subsequent injections the number of casts is generally increased, and in a few cases, on the same day that granular casts were noted, the chemical test for albumen became positive. In all cases the kidney irritation appeared to subside promptly. With mercury salicylate alone, the presence of hyaline casts seemed to predominate and rarely were granular casts found. The following percentages have been compiled from a limited number of cases, carefully followed:

	Per cent.
With salvarsan alone	33
With salvarsan and mercury salicylate combined	73
With mercury salicylate alone, about	50

WASSERMANN REACTIONS.

The Wassermann reactions, as performed for the past year, have been given the greatest amount of attention of any individual part of the laboratory activities, and in the main the results appear to have been quite satisfactory, and to have met the cations of syphilitic processes as observed by surgeons clinically.

Honolulu, Hawaii.

The department laboratory at Honolulu, Hawaii, was established in June, 1914, and Lieut. (now Capt.) Frederick H. Foucar was detailed in charge.

This laboratory is to serve the same purpose as other department laboratories in the United States and the Philippines.

MEDICAL DEPARTMENT.

The Medical Department consists of the Medical Corps, the Medical Reserve Corps, the Dental Corps, the Army Nurse Corps, and the Hospital Corps.

The following statement shows the strength of the personnel commissioned, enlisted, and employed by contract or otherwise, of the Medical Department on June 30, 1915:

Medical officers	433
Medical reserve officers, active duty	86
Contract surgeons	14
Dental surgeons, commissioned	34
Acting dental surgeons, under contract	35
Army Nurse Corps	150
Hospital Corps	3,993
Civil employees	229
Total medical personnel	4,974

MEDICAL CORPS.

The Medical Corps is composed of the commissioned medical officers of the Regular Army:

Authorized strength June 30, 1915	444
In service June 30, 1914	426
Appointed during the year	12
Total	438
Losses during the year	5
In service June 30, 1915	433

On October 1, 1914, 15 candidates who had passed the preliminary examination for appointment in the Medical Corps reported at Washington to take the course of instruction at the Army Medical School. Thirteen successfully completed the course of instruction at the school and were graduated June 1, 1915. Eleven graduates were recommended for appointment in the Medical Corps of the Army.

Losses during the fiscal year.

	Colonel.	Major.	Captain.	First lieutenants.	Total.
Retired	1				1
Resigned		1	1	2	4
Aggregate	1	1	1	2	5

The following promotions were made: One brigadier general to major general; 1 lieutenant colonel to be colonel; 1 major to be lieutenant colonel; 3 captains to be majors; 36 lieutenants to be captains.

The department held two preliminary examinations for appointment in the corps, the first on July 13, 1914, and the second on January 11, 1914, at various Army posts throughout the country. Sixteen applicants passed the preliminary examinations. Of this number 11 attended the session of the Army Medical School, which ended June 1, 1915, leaving 5 who will attend the next session of the school. A preliminary examination will be held on July 12, 1915, at various Army posts throughout the United States, Panama, and Porto Rico, to which 71 candidates have been invited; also 2 in the Philippine Islands who will be examined this summer.

MEDICAL RESERVE CORPS.

On roster June 30, 1914		1,254
Appointed during the year		218
		1,472
Losses during the year:		
Resigned	27	
Discharged	2	
Died	6	
Commissions vacated by appointment to regular corps	11	
		46
On roster June 30, 1915		1,426

Of the 1,426 on roster June 30, 1915, 86 were on active duty and 1,340 on the inactive list.

On active list June 30, 1914		91
Ordered to active duty during the year		47
		138
Relieved from active duty	39	
Commissions vacated	11	
Resigned	2	
		52
On active duty June 30, 1915		86

An officer of the Medical Reserve Corps residing in the vicinity of each military post has been designated as a locum tenens, and the policy has been adopted of calling such officer into actual service for duty at his post when all the regular medical officers thereat are called upon to accompany troops into the field. When the Second Division was mobilized in February, 1913, the medical officers were thus enabled to promptly leave the posts with the troops, their places being filled in the manner indicated.

CONTRACT SURGEONS.

In service June 30, 1914	16
Contracts made during the year	5
Total	21
Contracts annulled during the year	7
Contracts in force June 30, 1915	14

These contract surgeons are on duty at arsenals, remount depots, transports, etc., at the rate of pay ranging from $75 to $150 per month.

DENTAL CORPS.

Dental surgeons.

Number of dental surgeons in service June 30, 1914	28	
Appointed during the year	7	
	35	
Resigned during the year	1	
On duty June 30, 1915		34

Acting dental surgeons.

Number of acting dental surgeons in service June 30, 1914	39	
Appointed during the year	4	
	43	
Contracts annulled	1	
	42	
Contracts annulled by acceptance of commission as first lieutenant, dental surgeon	7	
On duty June 30, 1915		35
Total		69

One examination of applicants for appointment as acting dental surgeon, United States Army, was held during the year, on April 12, 1915. At this examination two were successful; these two, with two who had passed a previous examination, were given contracts.

Under the act of March 3, 1911, acting dental surgeons who have served three years in a satisfactory manner become eligible for appointment as dental surgeons and, after passing the prescribed examination, are eligible for commission in the dental corps with the rank of first lieutenant, provided the total number of dental surgeons of that rank did not exceed 60.

During the year 10 acting dental surgeons having served three years, became eligible for such promotion; of these, 7 passed the required examination and have been promoted.

HOSPITAL CORPS.

The authorized strength of the Hospital Corps is as follows:

Sergeants, first class	300
Sergeants	422
Corporals	50
Acting cooks	240
Privates, first class, and privates	3,000
Total	4,012

The number of sergeants, first class, is fixed by law; the total strength of the Hospital Corps and the number in the various other grades are determined by Executive order.

Strength at date of last report, June 30, 1914:	
Sergeants, first class	300
Sergeants	399
Corporals	41

Strength at date of last report, June 30, 1914—Continued.	
Acting cooks	180
Privates, first class, and privates	3,135
Total	4,055
Gain, July 1, 1914, to June 30, 1915:	
By enlistment	1,019
By transfer from line, including unassigned recruits from depots	786
By return from desertion	159
General prisoner restored to duty	1
Total	1,965
Loss during same period:	
By discharge—	
Expiration of term of service	1,146
By order	259
Certificate of disability	74
Sentence general court-martial	138
Transfer to line	86
By retirement	31
By death—	
Due to disease	11
Due to drowning, wounds, and other accidental causes	3
Suicide	1
By desertion	275
Dropped	3
Total	2,027
Leaving in service June 30, 1915:	
Sergeants, first class	299
Sergeants	408
Corporals	42
Acting cooks	187
Privates, first class, and privates	3,057
Total	3,993

An examination for promotion to the grade of sergeant, first class, Hospital Corps, was held May 17–22, 1915. Of the 135 candidates admitted to the class, 24 withdrew, 84 were recommended by the local boards for advancement, and 27 were not recommended for advancement. The papers submitted by the members of this class are now being examined and graded.

Examinations were held in all departments and at independent stations during period covered by this report to secure eligibles for promotion to the grade of sergeant, Hospital Corps, and 142 men received appointments.

Twenty-five privates, first class, or privates were appointed to the grade of corporal, Hospital Corps.

Great difficulty was experienced in furnishing sufficient number of Hospital Corps men to meet the needs of the departments and independent stations, the total number allowed the corps, 4,012, being inadequate for the purpose.

ARMY NURSE CORPS.

The authorized strength of the Army Nurse Corps for the fiscal year ending June 30, 1915, has been 150. No difficulty has been experienced in keeping the corps filled to this limit; in fact, the applications

for appointment are far in excess of the available vacancies. During the year 882 requests were received for application blanks. There were 38 discharges and 2 deaths, 32 appointments, and 8 reappointments. The deaths were Miss Isabel McIsaac, Superintendent of the Army Nurse Corps, September 21, 1914, and Nurse Edith L. Richmond, August 10, 1914. Miss Dora E. Thompson, chief nurse at the Letterman General Hospital, San Francisco, was appointed to succeed Miss McIsaac as Superintendent of the Army Nurse Corps.

Repeated requests for nurses have been received from the base hospital, Fort Sam Houston, from Fort Sheridan, Ill., and for temporary assignment to the U. S. Army transport *Buford* when making trips to Mexico for refugees, as well as for additional nurses at the Letterman General Hospital, department hospital, Honolulu, and the Army and Navy General Hospital, Hot Springs. The need for nurses at these places was recognized, but the present number of nurses is inadequate to meet the demand, and fully 42 additional should be provided and could be promptly supplied from the present eligible list.

During the year the nurses have been on duty at the following places:

Walter Reed General Hospital, Takoma Park, D. C.
Office of attending surgeon, Washington, D. C.
Army and Navy General Hospital, Hot Springs, Ark.
Army General Hospital, Fort Bayard, N. Mex.
Post hospital, Fort Leavenworth, Kans.
Letterman General Hospital, San Francisco, Cal.
Department hospital, Honolulu, Hawaii.
Department hospital, Manila, P. I.
Post hospital, Fort William McKinley, P. I.
Field hospital No. 3 at Vera Cruz, Mexico, and Galveston, Tex., from the beginning of the fiscal year until December, 1914.

At the beginning of the present European war, when it was contemplated to send six transports to Europe for the purpose of bringing back American refugees, two Army nurses were designated to temporary duty on each boat. During their absence in August and September five contract nurses were employed at the Walter Reed General Hospital to supplement the reduced force of Army nurses stationed there.

The second building of the new nurses' quarters at Letterman General Hospital is well on its way toward completion, and it is hoped that the third building will be finished and the quarters ready for occupancy by the end of 1915. New quarters for nurses are also in process of construction at the department hospital, Honolulu.

Separate quarters are needed for the nurses stationed at Fort Leavenworth, Kans., as they are at present occupying a portion of the hospital—an unsatisfactory arrangement.

ARMY MEDICAL SCHOOL.

[Commandant, Col. Charles Richard, Medical Corps, United States Army; adjutant, Maj. Reuben R. Miller, Medical Corps, United States Army.]

Maj. Theodore C. Lyster, Medical Corps, was assigned to duty as professor of ophthalmology, October 20, 1914, relieving Maj. Paul F. Halloran, Medical Corps.

Capt. Percy L. Jones, Medical Corps, was assigned to duty as professor of sanitary tactics, September 11, 1914, relieving Capt. William A. Wickline, Medical Corps.

Capt. Matthew A. Reasoner, Medical Corps, was assigned to duty as assistant professor of bacteriology, pathology, and clinical diagnosis, September 1, 1914, relieving Capt. Henry J. Nichols, Medical Corps.

Capt. Thomas D. Woodson, Medical Corps, reported July 6, 1914, for a special course of instruction, relieving Capt. Edgar King, Medical Corps.

The nineteenth session of the school began October 1, 1914, and ended June 1, 1915.

The number of accepted candidates appointed in the Medical Reserve Corps and ordered to the school was 16. One of this number resigned his commission after reporting at the school and prior to the opening of the session.

Four members of the Medical Corps of the Organized Militia, one from the Alabama National Guard, one from the Indiana National Guard, and two from the Ohio National Guard, were admitted to the school. The officer from Alabama left the school on December 31, 1914, and the officer from Indiana availed himself of leave of absence on November 11, 1914, and failed to return, neither of them having been properly relieved from attendance. The two officers from Ohio finished the course and were found proficient.

Two student-candidates failed to pass the mid-term examinations and were relieved from duty February 3, 1915; 13 completed the course and qualified at the final examinations, 11 being recommended for commission in the Medical Corps and 2 failing to receive such recommendation because of deficiency in aptitude for the military service.

The following table shows the subjects taught, the number of hours devoted to each, names of instructors, and the value of the several subjects:

No.	Subject.	Hours of instruction.	Professor.	Value.	
				Maximum.	Minimum.
1	Military surgery	21½	Col. Charles Richard	800	640
2	Medical Department administration	46½	Lieut. Col. James D. Glennan	800	640
3	Military medicine and tropical medicine.	29½	Lieut. Col. Champe C. McCulloch, jr.	800	640
4	Bacteriology, pathology, and clinical diagnosis.	28¼	Maj. Eugene R. Whitmore	900	720
5	Military hygiene	23	Maj. Wm. J. L. Lyster	800	640
6	Sanitary chemistry	176	Maj. Reuben R. Miller	600	400
7	Ophthalmology	62	Maj. Theodore C. Lyster	400	320
8	Operative surgery	9	Capt. Arthur C. Christie	400	320
9	Roentgenology	35½	do	300	240

In addition to the above, the following instruction was given:

Series of 15 lectures on psychiatry, by First Lieut. William A. White, Medical Reserve Corps, supplemented by cases illustrating the subjects of the lectures; 9 lectures on military law, by Maj. Walter A. Bethel, Judge Advocate General's Department; 31 hours in equitation at Fort Myer, Va., by First Lieut. Alexander L. James, Fifth United States Cavalry, United States Army, instructor.

A series of interesting and very instructive lectures were delivered by special professors, session 1914–15, as follows:

"Benign and malignant tumors," by First Lieut. Joseph C. Bloodgood, Medical Reserve Corps, of Baltimore, Md., two lectures; "Modification of the heart sounds and their significance," by First Lieut. William S. Thayer, Medical Reserve Corps, of Baltimore, Md., three lectures; "Before and after Lister," by First Lieut. William W. Keen, Medical Reserve Corps, of Philadelphia, two lectures.

Two sergeants, Hospital Corps, were detailed at the school for instruction in X-ray work and photography; they both proved to be apt, and acquired the technical knowledge and skill necessary to qualify them as instructors in these subjects, and were given certificates of proficiency. One sergeant, Hospital Corps, was detailed at the school for instruction in bacteriological laboratory work.

One native of the Philippine Islands was admitted to the school for instruction in X-ray work, upon request of the Bureau of Insular Affairs.

The closing exercises were held in the lecture room of the school at 2 o'clock p. m., Tuesday, June 1, 1915. The graduating address, entitled "The Medical Corps in peace and war," was delivered by First Lieut. Reynold W. Wilcox, Medical Reserve Corps, of New York City. The diplomas were presented by the Hon. Henry S. Breckenridge, Assistant Secretary of War. Col. John Van R. Hoff, United States Army, retired, presented the Hoff memorial medal to First Lieut. Harry D. Offutt, Medical Reserve Corps; and the Sternberg medal was presented by the founder, First Lieut. Richard Slee, Medical Reserve Corps, of Swiftwater, Pa., to First Lieut. Raymond E. Scott, Medical Reserve Corps. The exercises were closed by short addresses by Brig. Gen. George M. Sternberg, United States Army, retired, the founder of the school, and Maj. Gen. William C. Gorgas, Surgeon General, United States Army.

SPECIAL WORK BY MEDICAL OFFICERS.

A board was appointed for the purpose of investigating the adaptability of the new personal equipment of Infantry and Cavlary soldiers to the requirements of the Hospital Corps personnel and for the consideration of such other matters pertaining to the personal equipment of the Hospital Corps soldiers as may be referred to it by the Surgeon General; the board consisting of Maj. Douglas F. Duval, Maj. Reuben B. Miller, and Capt. Percy L. Jones, Medical Corps. As the result of the work of this board 500 new model belts to take the place of the Hospital Corps pouch were manufactured and issued for trial. They also considered the matter of supplying medical officers with a belt for carrying a certain limited number of articles in the field.

A board was appointed to consider the necessity for revising the first-aid packet and the desirability of introducing tincture of iodine

as a component, consisting of Maj. Eugene R. Whitmore, Maj. Allie W. Williams, and Capt. Arnold D. Tuttle, Medical Corps. This board recommended certain modifications in the first-aid packet and approved the idea of introducing iodine in ampules. Capt. Tuttle devised an ingenious method of introducing iodine in ampules wrapped in sterile gauze for use in the field, and in this form it will be incorporated in the first-aid packet.

Col. George H. Bushnell, Medical Corps, was directed by the Secretary of War to make an inspection of the hospitals at Fort Stanton, N. Mex., and Las Animas, Colo., sanitaria used for the treatment of tuberculosis by the United States Public Health Service and the Navy Department, respectively, in connection with the proposed consolidation of the Government hospitals for the treatment of tuberculosis. A most interesting and comprehensive report was rendered by Col. Bushnell on this subject, rendered more valuable by the fact that his long residence at Fort Bayard, N. Mex., enabled him to arrive at more accurate conclusions as to the relative merits of these three places as sanitaria for the treatment of tuberculosis in patients in the Government service.

Capt. Edward B. Vedder, Medical Corps, covered a wide and interesting field in his study of syphilis in the Army, as it included also a study of many different classes of civilians. The result of his work and his conclusions are published in Bulletin No. 8, Surgeon General's Office, 1915.

The field medical supply depot, Washington, D. C., has been carrying on experiments during the year with portable X-ray appliances mounted on automobiles. The portable operating room and equipment carried by an automobile have also been worked out at this depot. The American Red Cross Society in supplying automobile ambulances to belligerents abroad gave opportunity to the medical officers on duty in Washington to study the types of ambulances selected by them. This enabled the members of the corps to arrive at some definite conclusions as to the type and character of automobile ambulance desirable in our service.

Maj. Joseph H. Ford, Medical Corps, while in Europe on leave of absence for the purpose of studying the hospital corps organizations of different continental armies was appointed, shortly after the outbreak of the war, as a military observer for the Medical Department. It is believed that his experience in studying the methods of caring for the sick and wounded in the field under modern conditions of warfare will be of great value.

In August, 1914, a board was appointed for the purpose of investigating the question of a reclassification of the general prisoners, with special reference to mental alienation, at the United States disciplinary barracks, Fort Leavenworth, Kans., consisting of Maj. Kent Nelson and Capt. Edgar King, Medical Corps, and First Lieut. Edgar F. Haines, Medical Reserve Corps. This board rendered a report most comprehensive and interesting in character. It is hoped that it can be published in order that its interesting findings with reference to military delinquency may be made available to officers of both the line and medical corps. It is believed this work is unique in our service and throws more light on the questions concerning military offenders and desertion than any work yet accomplished by United States Army officers.

ARTICLES BY MEDICAL OFFICERS.

NOTE.—It is desired to include in this list all articles written by medical officers during the fiscal year. It is therefore requested that the title and place of publication of articles written by medical officers be sent to the office of the Surgeon General.

Articles by medical officers of the Army, July 1, 1914, to June 30, 1915.

Author.	Article.	Disposition.
Ashford, Maj. B. K.	Supplement to Ritchie's Primer of Sanitation. (See also Board for Study of Tropical Diseases.)	Prepared for use in public schools of Porto Rico and published by World's Book Co.
	A monilia found in certain cases of sprue, preliminary note.	Included in official report of tropical medicine and hygiene to the Legislature of Porto Rico. Journal of American Medical Association, March, 1915.
	Is sprue a monoliasis of the digestive tract?	Read before American Society for Advancement of Clinical Investigations, Washington, D. C., May 10, 1915.
	Studies in monoliasis of the digestive tract in Porto Rico.	Read before Association of American Physicians, Washington, D. C., May 11-13, 1915. To appear in American Journal of Medical Sciences.
	Relation of the genus Monilia to certain fermentative conditions of the intestinal tract in Porto Rico.	Read before Medical Society of the District of the North of the Porto Rico Medical Association, Mar. 18, 1915. Journal of American Medical Association, June 5, 1915.
Birmingham, Col. H. P.	Sanitary work of the Army at Vera Cruz, Mexico.	Military Surgeon, March, 1915.
Boak, First Lieut. S. D. (dental surgeon).	Militia dental surgeons	Dental Cosmos, December, 1914.
	Army dental corps	Dental Cosmos, May, 1915.
Bruns, Capt. Earl H.	Artificial pneumothorax in the treatment of tuberculosis.	New Mexico Medical Journal, January, 1915.
Callender, First Lieut. George R.	Albumen in sputum and its relation to pulmonary disease.	Medical Record, Nov. 7, 1914.
	Endocarditis of the pulmonic valve caused by Micrococcus endocarditis rugatus.	American Journal of Medical Sciences, May, 1915.
	Roentgen ray in pulmonary tuberculosis.	Interstate Medical Journal, June, 1915.
	Gastric glands in Meckel's diverticulum.	American Journal of Medical Sciences, July, 1915.
Chamberlain, Maj. W. P.	The prevention of beriberi among Philippine Scouts by means of modification in the diet.	Journal of American Medical Association, May 15, 1915.
	Spirochete and fulsiform bacilli in various lesions in the Philippines.	American Journal of Tropical Disease and Preventive Medicine, October, 1914.
Church, Maj. James H.	Ehrlich's arsenic in the treatment of syphilis in the military service.	Military Surgeon, January, 1915.
	Unique case of gunshot wound of the head.	Military Surgeon, April, 1915.
Craig, Capt. Chas. F.	Morphology, life cycle, and relation to disease of Entamoba histolytica.	American Journal of Tropical Disease and Preventive Medicine, September, 1914.
	The malarial fevers	Osler and McCrae's Modern Medicine, 2d ed., Vol. II, August, 1914.
	The results and interpretation of the Wassermann test.	American Journal of Medical Sciences, January, 1915.
	New varieties and species of malaria plasmodia.	Journal of Parasitology, December, 1914.
	The serological diagnosis of syphilis.	Bulletin, Jackson County Medical Society, pt. 1, 1914.
Craig, Capt. Harold M.	Medical survey of Indian village, Haines, Alaska. (Collaborated with Capt. J. S. Lambie.)	Military Surgeon, July, 1914.
Crum, Capt. Wayne H.	The size of a sanitary soldier	Military Surgeon, October, 1914.
Duncan, Capt. Louis C.	Battle losses of the campaign in Manchuria.	Journal of the Military Service Institution, November-December, 1914.
De Laney, Maj. M. A.	Post-graduate study in Vienna and its value.	Military Surgeon, October, 1914.
Dutcher, Maj. B. H.	The failure of emetin hydrochloride, but the apparent success of salvarsan in a case of balantidiosis.	American Journal of Tropical Diseases and Preventive Medicine, April, 1915.
	Etiology of filariasis, etc.	American Journal of Tropical Diseases, New Orleans, August, 1915.
Eastman, Maj. Wm. R.	Operative perforation of the nasal septum.	Military Surgeon, June, 1915.

Articles by medical officers of the Army, July 1, 1914, to June 30, 1915—Continued.

Author.	Article.	Disposition.
Fauntleroy, Maj. P. C.	Description of individual portable filter.	The Southern Medical Journal, November, 1914.
	Gunshot and shell wounds	Medical Record, December, 1914.
Ford, Maj. Clyde S.	The relief problem of the American Red Cross Society suggested by Balkan war experience.	New York Medical Journal, May 23, 1915.
	Some medico-military observations in the late Balkan wars.	New York Medical Journal, January, 1915.
	General medico-military observations in late Balkan wars.	Military Surgeon, January, 1915.
	Medical experiences in Balkans	West Virginia Medical Journal, Wheeling, February, 1915.
	Medico-military observations in the field.	Read before twenty-third annual meeting of Association of Military Surgeons, Cincinnati, Ohio, Sept. 30, 1914.
	The care of the wounded in the Balkan wars.	The Survey, Jan. 2, 1915.
	Medico-military experiences and gunshot wounds in the Balkan wars.	Address delivered before Kansas Medical Society.
	Lectures on the Balkan wars	Delivered at Army Service Schools, Fort Leavenworth, Kans., session 1914–15.
Ford, Maj. J. H.	The sanitary service of maneuver camps (excerpt from his book on Military Medical Administration.	Military Surgeon, August, 1914.
Foster, Capt. Geo. B., jr	Endemic typhus fever in the Philippine Islands, observations based on a study at Camp Keithley, Mindanao, P. I., with the results of animal inoculations.	Archives of Internal Medicine, September, 1915.
Garcia, Capt. Leon C.	The water-supply problem at Morgan, Ala.	To appear in Military Surgeon.
Goldthwaite, Capt. R. H.	Methods of handling field hospital equipment.	Military Surgeon, October, 1914.
Gorgas, Maj. Gen. W. C., Surgeon General.	Recommendations as to sanitation concerning employees of the mines on the Rand made to the Transvaal Chamber of Mines.	Military Surgeon, July, 1914.
	Report on malaria and blackwater fever in southern Rhodesia.	Southern Medical Journal, September, 1914.
	How to eradicate the fly. (Collaborated with Maj. William Lyster, M. C.)	The Omaha Nebraskan, Apr. 1, 1915.
	Sanitation in Panama (book)	Published by D. Appleton & Co., New York and London, 1915.
Haines, Lieut. E. F., M. R. C.	The modern treatment of amoebic dysentery. (Collaborated with Maj. Kent Nelson, M. C.)	Boston Medical and Surgical Journal, Dec. 26, 1914.
Hopwood, Capt. L. L.	An ambulance company: In garrison; on the march; in camp; in the field; with an analysis of its equipment.	Military Surgeon, February, 1915.
Jones, Capt. Glenn I.	The treatment of intestinal amoebiasis.	Journal of American Medical Association, Mar. 20, 1915.
Jones, Capt. Percy L.	General rules governing dressing stations, with suggestion for changes in equipment.	Read before twenty-third annual meeting of Association of Military Surgeons, Cincinnati, Ohio, Sept. 29, 1914. Military Surgeon, December, 1914.
La Garde, Col. Louis A.	Gunshot injuries	Reference Handbook of the Medical Sciences, 1915.
Lake, Capt. George B.	Gonorrhea treated with succinimide of mercury administered intramuscularly.	Medical Record, Apr. 10, 1915.
Lambie, Capt. J. S., jr.	Medical survey of Indian village, Haines, Alaska. (Collaborated with Capt. H. M. Craig.)	Military Surgeon, July, 1914.
Lyster, Maj. Wm. J. L.	Sterilization of drinking water by calcium hypochlorite in the field.	Read before twenty-third annual meeting of Association of Military Surgeons, Cincinnati, Ohio, Sept. 30, 1914. Military Surgeon, March, 1915.
	How to eradicate the fly. (Collaborated with Maj. Gen. W. C. Gorgas, Surgeon General.)	The Nebraskan (Omaha), Apr. 1, 1915.
	Hygiene in the summer camp	Outing Magazine, July, 1915.
Michie, Capt. H. C.	Mexican typhus fever	Medical Record, Feb. 6, 1915.
	Rocky Mountain spotted (tick) fever.	To appear in Medical Record.

Articles by medical officers of the Army, July 1, 1914, to June 30, 1915—Continued.

Author.	Article.	Disposition.
Munson, Maj. Edw. L.....	Cholera carriers in relation to cholera control.	Read before meeting of Philippine Islands Medical Association as part of transactions of society. Philippine Journal of Science, January, 1915.
Nelson, Maj. Kent.....	Observations of the results of seven months' experience with salvarsan in the treatment of syphilis. (Collaborated with Lieut. E. F. Haines, M. R. C.)	Journal of American Medical Association, Dec. 26, 1914.
Nichols, Capt. Henry J.....	Observations on the pathology of syphilis.	Read before section on dermatology, sixty-fifth annual session of American Medical Association, Atlantic City, N. J., June, 1914. Journal of American Medical Association, Aug. 8, 1914.
	Observations on experimental infection of the gall bladder in the rabbit.	Journal of Experimental Medicine, December, 1914.
	The influence of tropical medicine on general medicine.	Read before Society of Tropical Medicine, San Francisco, Cal., June 14, 1915.
	Observations on antityphoid vaccination.	Read before meeting of American Society of Tropical Medicine, San Francisco, Cal., June 14, 1915.
Owen, Capt. Leartus J.....	Report on the pathological examination of intercartoid body.	Annals of Surgery, March, 1915.
Peed, Capt. Geo. P.....	A guide to facilitate the organization and administration of independent sanitary commands in the Field. (Collaborated with Maj. A. E. Truby.)	Military Surgeon, pt. 1, March, 1915; pt. 2, April, 1915.
Qualls, First Lieut. G. L....	Rope in bread in field bakery U. S. Army.	Military Surgeon, June, 1915.
Reno, Maj. William W.....	Proposed methods of pitching and striking pyramidal, small pyramidal, and ward tents.	Military Surgeon, August, 1914.
	A proposed method of pitching a field hospital.	Read before meeting Association of of Military Surgeons, Cincinnati, Ohio, Sept. 30, 1914. Military Surgeon, March, 1915.
	Pitching Army tentage.....	Infantry Journal, May-June, 1915.
Richard, Col. Charles.....	The U. S. Army Medical School.....	Interstate Medical Journal, September, 1915.
Russell, Maj. F. F.....	A combined stain for malarial parasites and blood smears.	Journal of American Medical Association, June 26, 1915.
Schmitter, Capt. Ferdinand.	(See Board for the Study of Tropical Diseases.)	
Smith, Capt. William H....	Report on new ward tent for field hospitals—advantages of new tent over hospital tent as observed at field hospital No. 3, at Texas City, Tex., and method of closing in tent for winter months.	Read before meeting of Association of Military Surgeons, Cincinnati, Ohio, Oct. 2, 1914. Military Surgeon, April, 1915.
Tignor, Lieut. Edwin P. (dental surgeon).	The educational value of oral hygiene in the Army.	Read before Panama-Pacific Dental Congress, San Francisco, Cal., September, 1915.
Trinder, First Lieut. F. H..	A new methof of carrying a patient with one or two bearers without litter.	Military Surgeon, September, 1914.
	A practical knockdown cover for straddle-pit latrines.	
Tropical Diseases, Board for the Study of.	Sprue treated by emetin hydrochloride.	Journal of American Medical Association, Jan. 2, 1915.
Truby, Maj. Albert E.....	An efficient method of heating water in camps of some permanency. (See also collaboration with Capt. Geo. P. Peed, M. C.)	Military Surgeon, October, 1914.
Vedder, Capt. Edw. B.....	A comparison of the Wassermann and Leutin reactions on 744 individuals.	Journal of American Medical Association, Nov. 14, 1914.
	Starch agar, a useful culture medium.	Read before Society of American Bacteriologists, Dec. 29, 1914. Journal of Infectious Diseases, May, 1915.
	The prevalence of syphilis among the patients of the Government Hospital for the Insane. (Collaborated with Dr. Wm. H. Hough.)	Journal of American Medical Association, Mar. 20, 1915.

Articles by medical officers of the Army, July 1, 1914, to June 30, 1915—Continued.

Author.	Article.	Disposition.
Vedder, Capt. Edw. B.....	Report on diet in relation to pellagra.	To appear as part of final report of the Thompson-McFadden Pellagra Commission of the New York Post Graduate Medical School and Hospital.
Watkins, First Lieut. Victor E., M. R. C.	History of a case of Jacksonian epilepsy.	Medical Record, June 26, 1915.
Whitmore, Maj. Eugene R..	Antityphoid vaccination.....	Read before Medical Society of State of Pennsylvania, Pittsburgh, Sept. 23, 1914. Pennsylvania State Medical Journal, January, 1915.
Williams, Maj. A. W.....	Identification of two unknown soldiers by finger prints.	Military Surgeon, July, 1914.
	Etiology of whooping cough.....	Archives of pediatrics, August, 1914.
Williams, Maj. A. W.....	Report of sanitary conditions at Vera Cruz, Mexico.	New York Medical Journal, July 25, 1914.
	Report of the surgical service at Field Hospital Company No. 3.	Read before twenty-third annual meeting of Association of Military Surgeons, Cincinnati, Ohio, Oct. 2, 1914. Military Surgeon, December, 1914.
	Report of 52 cases of appendicitis, operated on under field-service conditions.	New York Medical Journal, January, 1915.
	A portable positive-pressure apparatus for administration of ether by intratracheal insufflation.	Journal of American Medical Association, Jan. 9, 1915.

BULLETINS.

In the sundry civil bill for 1915, under the appropriation for printing and binding for the War Department, it was provided:

That the sum of $3.000, or so much thereof as may be necessary, may be used for the publication from time to time of bulletins prepared under the direction of the Surgeon General of the Army for the instruction of medical officers when approved by the Secretary of War.

Three bulletins have been issued during the fiscal year under the authority mentioned above: Bulletin No. 6, The Prophylaxis of Malaria with Special Reference to the Military Service, by Capt. Charles F. Craig, Medical Corps, August, 1914; Bulletin No. 7, Studies in Roentgen Ray Diagnosis, by Capt. Arthur C. Christie, Medical Corps, September, 1914; and Bulletin No. 8, The Prevalence of Syphilis in the Army, by Capt. Edward B. Vedder, Medical Corps.

Material for three bulletins is now on hand, and it is hoped to issue them and perhaps an additional one or two during the fiscal year 1916.

SANITARY TROOPS.

The following is an extract from the report furnished this office by Maj. Harry L. Gilchrist, Medical Corps, United States Army, detailed for duty in the office of the Chief, Division Militia Affairs, War Department:

The year has been a successful one for the sanitary troops of the Organized Militia, and more true progress toward the creation of an efficient sanitary service has been made, it is believed, than in any of the past years. The reasons for this improvement are:

(1) The adoption of Circular 18, which presents a uniform organization of the sanitary troops of all States.

(2) Increased support on the part of the State authorities.

(3) Detail of inspector-instructors from the Regular Army.

(4) The conducting of correspondence courses.

(5) Elimination of medical officers apparently not interested in the work.
(6) The instilling of younger blood into the corps.

Up to December, 1914, there was no uniform organization of the sanitary troops of the Organized Militia, each State having its own particular organization, some of which were good, others poor. In some States the medical departments were organized as nearly like that of the Regular Army as possible. Its officers were appointed and promoted only after rigid examinations and all promotions made by seniority when possible. In other States the medical officers were appointed without examination and irrespective of their fitness to hold the positions, and promotions made by favoritism. As a result there was much dissatisfaction. There was also a lack of uniformity concerning the instruction of these troops. Some States endeavored to conduct thorough and comprehensive courses of instruction, others totally ignored this subject. On December 24, 1914, Circular No. 18 was published, which prescribes not only the organization of all sanitary troops in the Organized Militia, but the plan of examination for entrance and promotion as well. This circular was based upon the law governing the sanitary troops of the Regular Army, and is adaptable to the sanitary troops of the Organized Militia in every way, and its provisions will be strictly adhered to by the Federal Government.

The sanitary troops are organized into 28 field hospitals, 18 ambulance companies, and 160 detachments, being an increase of 2 field hospitals and 4 ambulance companies during the past year, the number of officers in the medical corps, 852,[1] and the number of enlisted men in the hospital corps, 3,997,[2] being a loss of 17 commissioned officers and a gain of 443 enlisted men during the year. While there has been a relative increase in the number of these troops as a whole, yet this is not general and is confined to 27 States. There is still a marked deficiency in field hospitals and ambulance companies, and there seems to be a reluctance on the part of the State officers to organize these units, although this division has made every endeavor to encourage them. Notwithstanding the small relative increase in the number of field hospitals and ambulance companies during the year, yet the increase in efficiency in those already organized is most marked, nearly all being completely equipped, including transportation, etc. there is still a tendency, however, on the part of some States in which these organizations exist to curtail the financial support of them, which policy, if continued, will interfere with further progress. Attention is now invited to Table A, which covers a period from July 1, 1914, to August 1, 1915. In analyzing this table, the following facts are noted:

Out of a total of 852 commissioned officers, 156, or nearly one-fifth were not inspected, rendering it impossible to state as to the preparedness of these officers for field duty. Of 3,997 enlisted men, 506, or over one-seventh, were absent from inspection, thereby rendering it impossible to comment on their condition. Twenty-seven States show an increase in sanitary troops of 649, and of this number 102 were from the State of New York. In the remaining States there was a decrease. In the majority of States, the efficiency of the sanitary troops relative to organization, training, and equipment show marked improvement, although it is far from having reached that standard which is necessary, if immediate use of these organizations for war is to be considered. The degree of efficiency differs widely. In many States but a short period of preparation would be needed to make the sanitary troops ready for field duty. In others, however, much time and labor would be required.

TYPHOID PROPHYLACTIC.

Notwithstanding the fact that it has been clearly demonstrated that immunization from typhoid fever by the use of the typhoid prophylactic is a thoroughly practical measure for the prevention of this disease, that it is unattended by bad results, and that its protective value is very probably equal to that afforded against smallpox by vaccination, there appears to be much reluctance in some States against taking it. Every effort has been made by the Division of Militia Affairs to encourage this, even offering to furnish the serum free of cost. Notwithstanding, but a very small proportion are protected against the ravages of this disease. It is believed the time has arrived for the State authorities to take hold of this important matter and handle the same as any precaution inaugurated for the health of a community.

[1] Number taken from State rosters.
[2] Includes new detachments in Nebraska and field hospital No. 2 in Pennsylvania.

INSPECTOR-INSTRUCTORS.

Up to November 1, 1914, but one inspector-instructor, Maj. Sanford H. Wadhams Medical Corps, United States Army, was on duty with the Organized Militia. In November, however, four additional medical officers of the Army were detailed for this important work: Maj. Henry Page, Maj. Louis T. Hess, Maj. M. A. W. Shockley and Maj. James M. Phalen. Due to the limited number of these officers and the demand for their services by the different States, it was necessary to assign them to large territories, which necessitated dividing the entire district east of the Mississippi River, with the addition of the States of Minnesota, Iowa, and Missouri, into five districts for purposes of instruction. These districts were large, each consisting of several States, no two of which had sanitary organizations organized or instructed along similar lines. In many States there was also a marked shortage of textbooks and although the matter was presented to the proper State authorities little or no attempt was made to obtain them. As a result, the carrying on of the work was greatly handicapped. In the majority of States the inspector-instructors were given every possible assistance, but this can not be said of all. As a result of these conditions, the work of the instructors has been very trying and extremely difficult; nevertheless by hard and conscientious labor, they succeeded in organizing and establishing uniform courses of instruction, for which much credit is due them. Their work throughout was of a high degree of excellence.

In the selection of officers for this important duty, an effort was made to detail only those who had been affiliated with the Organized Militia in one capacity or another and who were acquainted with the work. In assigning them to their stations, efforts were made to place them in districts where they were familiar, but prior to beginning their work they reported to this division for preliminary instruction and training. Here they were given access to all reports, records, etc., pertaining to the sanitary troops in the districts to which they were assigned. The difference in training and preparation of these troops in the several States was known, and it was realized that if any success was to be achieved in the work it would be necessary to rehabilitate the majority of the sanitary organizations and have them reorganized on a single plan, the fundamental idea being coordination and uniformity. In addition to the five Regular medical inspector-instructors, the following named medical officers of the Regular Army were detailed to conduct correspondence courses for medical officers of the Organized Militia in their vicinity:

Lieut. Col. Frederick P. Reynolds.
Maj. William E. Vose.
Maj. Peter C. Field.
Maj. Edwin C. Wolfe.
Maj. Charles R. Reynolds.
Maj. James R. Church.
Capt. Chas. C. Billingslea.
Capt. Mark D. Weed.
Capt. Leonard S. Hughes.
Capt. John S. Barber.
First Lieut. Elvin W. Schoenleber.

These officers conducted the courses under the direction of the Division of Militia Affairs, and in carrying them out a scheme of uniformity prevailed, all following the provisions laid down in Circular 3 as nearly as possible. The work performed by them was excellent.

JOINT CAMPS OF INSTRUCTION.

Heretofore no joint camps of instruction for field hospital companies and ambulance companies have been held. The reasons for this were lack of proper organization equipment, and instruction of these militia units; lack of Regular establishments to participate at the camps; and the lack of Federal funds. In view of the many improvements in the field hospital and ambulance companies in the Organized Militia during the past year, and the fact that there would be available Regular organizations of like nature to participate therein, joint camps were established at Tobyhanna, Pa. Fort Sam Houston, Tex.; Sparta, Wis.; Fort D. A. Russell, Wyo.; and Presidio Cal. At these camps there was in attendance a complete field hospital and ambulance company of the regular establishment.

All States having these organizations were invited to participate at one of the above camps, and in order to encourage their attendance sufficient funds were allotted from "Encampments and maneuvers funds" to insure the cost of transportation for officers and transportation and subsistence of all enlisted men belonging to them. As far as practicable, the work of all camps was conducted along similar lines and according to a schedule of instruction which was prepared in this division and approved by the several department commanders, the fundamental idea being to give general instruction of a uniform nature in such matters as would be of greatest valu

o the organizations. At these camps the field hospital companies and ambulance ompanies of the Organized Militia took with them only their personal and camp equipments, and at the camps used the horses, ambulances, tentage, and other materiel of the Regular establishment. By this means the States were saved the expense of horse hire and transportation of matériel. Better still, by using the trained horses of the Regulars, and with the Regulars utilized as instructors, much better instruction was obtained and much greater progress secured.

TABLE A.—*Strength of sanitary troops, gain or loss during the fiscal year 1915, and number of sanitary organizations in the Organized Militia.*

States.	Commissioned officers as shown by State roster.			Enlisted men.			Aggregate.		Gain and loss.		Units.		
	Inspected.	Not inspected.	Total, 1915.	Inspected.	Not inspected.	Total.	1915.	1914.	Gain.	Loss.	Field hospital.	Ambulance companies.	Detachments.
1. Alabama	14	1	15	44	6	50	65	55	10	.....	.....	.....	3
2. Arizona	3	2	5	15	1	16	21	16	5	.....	.....	.....	1
3. Arkansas	7	4	11	23	3	26	37	10	27	.....	.....	.....	2
4. California	22	1	23	105	22	127	150	137	13	.....	1	1	7
5. Colorado	6	4	10	15	9	24	34	87	.....	53	1	.....	.....
6. Connecticut	21	1	22	108	9	117	139	116	23	.....	1	1	3
7. Delaware	3	.....	3	3	2	5	8	13	.....	5	.....	.....	1
8. District of Columbia	14	.....	14	63	11	74	88	88	.....	.....	1	.....	3
9. Florida	8	.....	8	23	11	34	42	23	19	.....	.....	.....	2
10. Georgia	21	3	24	71	26	97	121	43	78	.....	1	.....	5
11. Hawaii	2	2	4	13	4	17	21	19	2	.....	.....	.....	1
12. Idaho	5	.....	5	16	.....	16	21	30	.....	9	.....	.....	1
13. Illinois	42	5	47	163	22	185	232	225	7	.....	2	.....	10
14. Indiana	13	1	14	82	27	109	123	123	.....	.....	1	1	2
15. Iowa	13	10	23	76	11	87	110	109	1	.....	1	1	4
16. Kansas	8	1	9	33	.....	33	42	32	10	.....	.....	.....	1
17. Kentucky	14	1	15	71	15	86	101	103	.....	2	1	.....	3
18. Louisiana	4	5	9	33	5	38	47	49	.....	2	.....	.....	1
19. Maine	5	4	9	26	10	36	45	47	.....	2	.....	.....	2
20. Maryland	15	1	16	68	5	73	89	96	.....	7	1	1	3
21. Massachusetts	34	2	36	146	22	168	204	202	2	.....	1	1	10
22. Michigan	18	4	22	87	15	102	124	135	.....	11	1	2	.....
23. Minnesota	13	2	15	32	13	45	60	64	.....	4	.....	.....	4
24. Mississippi	2	3	5	26	14	40	45	28	17	.....	.....	.....	1
25. Missouri	18	9	27	80	47	127	154	136	18	.....	1	1	3
26. Montana	3	1	4	12	.....	12	16	14	2	.....	.....	.....	1
27. Nebraska	9	6	15	71	4	75	90	108	.....	18	1	.....	2
28. Nevada	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
29. New Hampshire	6	2	8	22	3	25	33	39	.....	6	.....	.....	1
30. New Jersey	26	1	27	159	10	169	196	161	35	.....	1	1	7
31. New Mexico	5	1	6	13	1	14	20	23	.....	3	.....	.....	1
32. New York	107	3	110	673	17	690	800	698	102	.....	2	3	22
33. North Carolina	24	4	28	113	21	134	162	85	77	.....	1	1	3
34. North Dakota	1	5	6	16	.....	16	22	27	.....	5	.....	.....	1
35. Ohio	49	5	54	294	20	314	368	294	74	.....	3	2	12
36. Oklahoma	8	3	11	52	5	57	68	57	11	.....	1	.....	1
37. Oregon	8	5	13	37	4	41	54	45	9	.....	.....	.....	2
38. Pennsylvania	43	27	70	210	8	218	288	228	60	.....	2	.....	13
39. Rhode Island	7	1	8	32	2	34	42	45	.....	3	.....	1	1
40. South Carolina	2	5	7	13	4	17	24	35	.....	11	.....	.....	1
41. South Dakota	5	.....	5	17	3	20	25	26	.....	1	.....	.....	1
42. Tennessee	10	4	14	77	47	124	138	149	.....	11	1	1	2
43. Texas	7	12	19	19	3	22	41	80	.....	39	1	.....	1
44. Utah	3	.....	3	19	.....	19	22	20	2	.....	.....	.....	1
45. Vermont	3	2	5	11	4	15	20	24	.....	4	.....	.....	1
46. Virginia	12	1	13	41	13	54	67	83	.....	16	.....	.....	3
47. Washington	6	.....	6	31	1	32	38	31	7	.....	.....	.....	3
48. West Virginia	8	.....	8	29	9	38	46	44	2	.....	.....	.....	2
49. Wisconsin	16	2	18	85	17	102	120	99	21	.....	1	.....	4
50. Wyoming	3	.....	3	23	.....	23	26	22	4	.....	.....	.....	1
Total	696	156	852	3,491	506	3,997	4,849	4,423	638	212	28	18	160

CONSTRUCTION AND REPAIR OF HOSPITALS.

During the past year plans and specifications were prepared and contracts were entered into for the construction of new hospital buildings at the following military posts and general hospitals:

Fort Leavenworth, Kans.—Building for central power plant to heat all hospital buildings.

Fort Oglethorpe, Ga.—Rear annex to contain kitchen, mess room, Hospital Corps dormitory, etc.

Fort Shafter, Hawaii.—Clinic laboratory, and Nurse Corps dormitory.

Fort Terry, N. Y.—Rear annex to contain kitchen, mess room, Hospital Corps dormitory, etc.

Army and Navy General Hospital, Hot Springs Ark.—Addition to ward building No. 6; Hospital Corps barrack building; operating pavilion; diet kitchen; storehouse, and one double set of noncommissioned officers' quarters.

General Hospital, Fort Bayard, N. Mex.—Wards for ambulant patients.

Letterman General Hospital, San Francisco, Cal.—Ward for special surgical cases; reinforced concrete ward to replace ward A of wood, and addition to Nurse Corps dormitory.

Walter Reed General Hospital, Takoma Park, D. C.—Two stories on corridor connecting administration building and rear addition; alterations for Nurse Corps dormitory; diet kitchens, etc., for kitchen and mess-room addition, and finishing attic of building containing isolation wards.

The following hospital buildings which were contracted for during the fiscal year which ended June 30, 1914, have been completed. Additional wards, isolation ward, operating pavilion, and Hospital Corps dormitory at Fort Shafter, Hawaii; ward for special cases, Letterman General Hospital, San Francisco, Cal; one additional ward building and two additional stories on kitchen and mess-room annex, Walter Reed General Hospital, Takoma Park, D. C.; garage, improvements in men's bathhouse, addition to officers' bathhouse, and a hydrotherapeutic outfit for the Army and Navy General Hospital, Hot Springs, Ark.

Allotments aggregating $41,000 were made from the appropriation for construction and repair of hospitals for use in the Philippine Department during the fiscal year, and $941 was allotted from the appropriation for quarters for hospital stewards, for quarters for sergeants, first class, Hospital Corps, to cover the cost of construction and repair of quarters for these noncommissioned officers in the Philippine Islands.

In addition to the foregoing, the Army general hospitals and the hospitals at military posts were improved or kept in proper repair so far as funds would permit.

The Army and Navy General Hospital, Hot Springs, Ark., has been improved in a manner to meet several of the most important necessities, but it has insufficient accommodations for patients entitled to treatment, and a large waiting list is the result. A hospital ward for the care and treatment of officers is a necessity, and the estimated cost of such a building is $25,000.

The wards of the Letterman General Hospital, San Francisco, Cal., are constructed of wood, have been in use for quite a number of years, and are dangerous in case of fire. It is proposed to safeguard the lives of patients by replacing these wooden buildings from time to time with reinforced concrete structures, and $75,000 is included in the annual estimate for the fiscal year 1917, to be used for this purpose.

As stated in previous reports, new and modern hospitals should be erected at the following military posts in the near future:

Fort McPherson, Ga.—The hospital at this post is in size entirely inadequate. It is located in close proximity to a railroad and has no cellar except a small excavation for a heating apparatus, which was made some years after the building was erected. The heating and ventilation are not suitable for a modern hospital. The plumbing is crude, and efforts have been made from time to time to improve it, but it falls far short of meeting the modern sanitary requirements. The operating room is located in a small annex, with a small laboratory adjoining. There is no instrument room, etherizing room, preparation rooms, nor surgical ward. There is no suitable ward for the isolation of contagious diseases, nor prison ward; and the Hospital Corps detachment is quartered in an old temporary wooden building which was erected for use as a ward during the Spanish-American War. The mess room and kitchen are too small and are unsuited for their purpose, it being necessary to set tables two or three times to accommodate the patients. The entire hospital is such that it would be in the interest of economy to replace it with a modern structure. A hospital should be erected with a capacity of 87 beds for patients, necessary attendants, noncommissioned officers, etc. The estimated cost of such a building is $90,000.

Fort Dade, Fla.—In 1910 the surgeon at this post recommended that a new modern hospital be erected, and stated:

> The kitchen and dining room are near the center of the building, and it is necessary to pass through them in going from the operating room to the ward. The ward is too small, and quarters for Hospital Corps men are inadequate. It is not believed that the present structure can be remodeled to meet the requirements of a modern hospital.

The commanding officer added:

> The building was poor enough when this was a one-company post, but now that it is garrisoned by two companies and is designed to be the largest post of the district it is totally inadequate.

The present hospital is entirely inadequate and unsuitable. It is a temporary structure with crude plumbing, lacks modern appliances, and the conditions are such that they can only be remedied by the erection of a new and modern hospital. A suitable building is estimated to cost $35,000.

Schofield Barracks, Hawaii.—The department authorities are preparing sketch plans for a 250-bed hospital, which is considered necessary for this post. An approximate estimate of the contemplated strength of the garrison for Schofield Barracks is 6,000 men, and this will require the number of beds estimated for. In addition to the bed capacity, other buildings will be needed in the future to complete the group, but six wards and an administration building will be sufficient for the present. The estimated cost of these buildings is $150,000.

Fort Sam Houston, Tex.—When the hospital at this post was enlarged by adding ward wings, kitchen, mess room, etc., provision for the Hospital Corps men on duty in the hospital was provided in a rear addition to the hospital, but funds have not been available to erect this addition. This is a large hospital, yet it lacks accommodations for attendants, and a suitable addition is estimated to cost $30,000. Funds for this purpose are included in the annual estimate submitted for the fiscal year 1917.

General hospital, Fort Bayard, N. Mex.—A few years ago authority was given to erect three additional ward buildings for this general hospital, but it was possible to enter into contract for the erection of only two of these wards, and the following buildings are now necessary: One infirmary for enlisted men, estimated to cost $50,000; one infirmary for officers, estimated to cost $60,000; and an addition to the officers' dormitory, estimated to cost $40,000, or a total of $150,000, and funds for these buildings have been included in the annual estimate for the fiscal year 1917.

Walter Reed General Hospital, Takoma Park, D. C.—This is one of four general hospitals. It is one of the most important, and is used for the treatment of officers, retired officers, patients from Washington Barracks, enlisted men, special cases, observation of patients under consideration for discharge on account of disability, and for the education of students attending the Army Medical School. New buildings and additions have been erected from time to time. Two new one-story wards have lately been added to the east and west ends of the administration building, and these two ward wings require additional stories to complete them. The additional room is necessary, and these improvements are estimated to cost $80,000, and funds for the purpose have been included in the annual estimate for the fiscal year 1917.

Army Medical School.—The Army Medical School occupies a rented building in the city of Washington, at a rental of $8,680 per annum. As it is one of the permanent service schools it would be much more economical, as well as more fitting and convenient, for it to be housed in buildings erected by the Government. It is proposed to locate these on the tract of land occupied by the Walter Reed General Hospital, so that the students may have the clinical advantages and the instruction in administration afforded by the hospital, and that the hospital may enjoy the laboratory conveniences of the school. These buildings are estimated to cost $350,000.

Quarters for sergeants, first class, Hospital Corps.—Owing to the limited appropriation for these buildings, it was not possible to erect additional quarters, and various necessary additions and improvements had to be disallowed. A number of large military posts are in need of such quarters for these noncommissioned officers, and the appropriation should be liberal until such time as the Hospital Corps sergeants are supplied with suitable habitations. Ten single sets and six double sets of these quarters are needed, but only the most necessary are included in the estimate.

Estimates for new construction which is essential to the proper care of the sick have been for some years lopped off of the estimates in accordance with the instructions of the Secretary of War in order to reduce the War Department estimates until the necessities of the department, in this respect, have become very urgent and have

accumulated to a large total. The following are the items which are considered to be most necessary, and are accordingly included in the estimate laid before the Secretary of War for the fiscal year 1917:

New construction:	
Army and Navy General Hospital, Hot Springs, Ark	$25,000
Army general hospital, Fort Bayard, N. Mex	150,000
Letterman General Hospital, San Francisco, Cal	75,000
Walter Reed General Hospital, Takoma Parkr D. C	80,000
Schofield Barracks, Hawaii	150,000
Fort McPherson, Ga	90,000
Fort Dade, Fla	35,000
Fort Sam Houston, Tex	30,000
To enlarge and improve hospitals at Artillery posts	50,000
Additions and repairs, general hospitals	65,000
Repairs, hospitals, all posts in the United States	200,000
Repairs, Hawaiian Department	30,000
Repairs, Philippine Department	50,000
Army Medical School	350,000
Total for construction and repair	1,380,000
Sergeants' quarters:	
Six single sets, new quarters	21,000
Four double sets, new quarters	26,000
Philippine Islands, repairs, etc	1,000
Repairs, all parts in the United States	15,000
Total for Hospital Corps sergeants' quarters	63,000

MEDICAL AND HOSPITAL SUPPLIES.

The appropriation made by Congress for the fiscal year 1915 for the support of the medical department was $700,000, this being $100,000 less than the amount asked for in the estimates submitted by the honorable the Secretary of War.

Medical supplies to the value of $54,103.53 were issued to the Philippine Department during the year.

When the troops were sent to Vera Cruz a supply depot was established at that place, and operated satisfactorily during the American occupation of that city. The supply depot formerly established at Galveston has been maintained during the year, and has furnished most of the regular field medical supplies required by the troops on the Mexican border. The regular medical supply depots have been maintained as formerly, and the service of supply has been satisfactory.

Several combination electric sterilizers have been purchased during the past year, and, after a thorough trial at several of the larger posts, have proved to be very efficient.

Recent improvements in the manufacture of various types of field X-ray apparatus have made it possible to obtain a type of machine which is at least 500 pounds lighter in weight than that formerly used in the Army. A small marine engine furnishes ample motor power for this new apparatus. The engine is much less noisy than the old-style engine, and causes very little vibration. During the year an X-ray machine of the new type has been on trial at the field medical supply depot, Washington, D. C., and appeared to be satisfactory. It is at present being tried out in actual field service in the Second Division, but sufficient time has not elapsed to warrant a conclusive report as to its efficiency under service conditions.

During 1914 a board of medical officers was appointed to investigate the adaptability of the new personal equipment of Infantry and Cavalry soldiers to the requirements of the Hospital Corps. In conformity with the provisions of this order the board has submitted for trial an equipment in which the articles now carried in the Hospital Corps pouch are contained in the packets of a woven web belt. This belt is intended to be worn with, and suspended by, the ration bags of the new Cavalry equipment. It is believed that in comfort to the wearer, durability, appearance, and general utility, this new equipment represents a distinct advance over anything heretofore provided for the Hospital Corps soldier.

A board was also convened for the purpose of revising the first-aid packet, with a view to including tincture of iodine as one of the component parts of the packet. This question has not yet been definitely settled, however. Capt. Tuttle, the junior member of the board, has devised an article known as a combined applicator, container, and swab. Briefly, this swab consists of a friable glass ampoule, hermetically sealed, and containing the iodine preparation; over this is placed a series of layers of absorbent gauze. The covered ampoule is inclosed in a small transparent envelope on which directions for use are printed. These directions are:

Place on any solid object, strike light blow, thus breaking the glass container and liberating the iodine solution. Then remove swab from envelope and paint wound and surrounding skin, from within outward.

ARTIFICIAL LIMBS AND APPARATUS.

Under laws relating to artificial limbs and apparatus or commutation therefor, orders on manufacturers were given during the fiscal year for 60 artificial legs and 6 arms. Commutation certificates were issued for 1,013 cases of amputated leg, 1,244 of amputated arm, 35 of amputated foot, and 1,115 cases of loss of use of limb.

Under the act of June 17, 1870, and subsequent amendments thereto, 23,664 disabled soldiers have been furnished artificial limbs or apparatus, or have received commutation in money, since the passage of the act as follows:

Total number benefited to June 30, 1915	23,664
Died	15,647
Dropped from rolls	592
Rejected after one or more payments	572
Remaining on rolls at end of fiscal year	6,853
Loss of beneficiaries during the year	1,002

It is estimated that the sum of $65,000 will be required to pay the claims during the fiscal year ending June 30, 1917.

APPLIANCES AND TRUSSES.

One hundred and nine appliances were issued during the fiscal year, and 248 trusses were furnished and fitted.

LIBRARY OF THE SURGEON GENERAL'S OFFICE.

During the year 425 books, 2,704 pamphlets and journals were presented to the library. The following table shows the additions made to the library during the fiscal year 1914–15:

	On hand June 30, 1914.	Added during fiscal year.	Total June 30, 1915.
Medical journals	59,333	1,147	60,480
Medical transactions	8,877	113	8,990
Bound theses	2,649	.....	2,649
Bound pamphlets	3,127	.....	3,127
Other medical books	111,851	1,217	113,068
Unbound volumes	33,657	231	33,888
Total	219,494	2,708	222,202
Medical theses	95,723	213	95,936
Medical pamphlets	234,597	7,056	241,653
Total	330,320	7,269	337,589

Volume XX of the second series of the Index Catalogue is in course of preparation and will appear in due time. It includes the important subject of "Waters, mineral," and its subdivisions. The reprinting of this subject as a separate has been authorized with a view to the more extensive distribution of bibliography of the subject.

The recommendation, repeated for the past three years, that two translators be provided at a salary of $1,800, in lieu of two clerks of class 2, was in part met by the creation of two positions of translator at $1,600, to become effective July 1, 1915. The creation of these two positions, at $1,800, was estimated for and approved by the Secretary of War in 1912. (See H. Doc. No. 944, 62d Cong., 3d sess., 1912, p. 56.)

To meet the needs of the library in its scientific and technical branches, the following changes in salaries have been submitted in the estimates:

Principal assistant librarian, from $2,250 to $2,500 per annum, an increase of..	$250
Assistant librarian, from $1,800 to $2,000 per annum, an increase of.....	200
Two translators, from $1,600 to $1,800 per annum, an increase of $200 each, or..	400

This increase in expenditure it is proposed to meet by the abolition of one clerkship at $900, which would provide for increases of salaries where greatly needed without additional expense to the Government. The positions for which increases are requested are, with one exception filled, and must be filled, by graduates in medicine who are also linguists versed in library methods and in medical literature.

The other position requires a high degree of bibliographical skill, as well as an extensive knowledge of languages, and to secure and retain a bibliographer of the attainments necessary a salary equivalent to that paid in other departments of the Government service requiring similar qualifications should be provided. It is hoped that the continued efficiency of the library may be provided for in this way by Congress at its next session.

ARMY MEDICAL MUSEUM.

The total number of specimens in the museum at the close of the fiscal year, June 30, 1915, is 46,995.

The following statement shows in detail the number of specimens in the different sections:

Pathological section	12,984
Anatomical section	1,208
Comparative anatomy	624
Microscopical section	12,916
Miscellaneous section	3,975
Provisional anatomical section	293
Photographic section	14,944

The following are some of the more interesting specimens received during the year ending June 30, 1915:

Malformation.—Specimen 14408, a fetal pig, janiceps asymmetros. Contributed by Dr. A. Y. Linville, Waughton, N. C. Specimen 14444, anencephalous female human fetus; the mother had menstruated and also had chills and diarrhea during her pregnancy Contributed by Dr. L. D. Dameron, Phoenix, Ariz. Specimen 14448 human female fetus at about five months; rhinocephalus. Contributed by Dr. Leopold Glushak, Washington, D. C. Specimen 14405, seven months' male human fetus, showing a large umbilical hernia containing the liver. Contributed by Dr. W. S. Bowen, Washington, D. C.

Tuberculosis.—Specimen 14424, heart showing tuberculous pericarditis; from a woman, age 22, who had general tuberculosis. Contributed by Dr. I. H. Lamb, Washington, D. C.

Aneurysm.—Specimen 14423, aneurysm of the arch of the aorta and innominate artery; rupture of the aortic aneurysm into the trachea; death from hemorrhage. From a soldier who had had gonorrhea many years before death. Contributed by Capt. H. J. Nichols Medical Corps, United States Army. Specimen 14422, aneurysm of innominate artery with rupture into pleural sac; dilatation of arch of aorta; death from hemorrhage. From a soldier. Contributed by Capt. A. D. Tuttle, Medical Corps, United States Army.

Hepatic abscess.—Specimen 14443, liver weighing 6 pounds, containing multiple abscesses in which were found the colon bacillus Contributed by Col. Guy L. Edie, Medical Corps, United States Army

Carcinoma.—Specimen 14400, lung and pleura showing colloid carcinoma; from an old soldier; secondary nodules of carcinoma in the diaphragm. Contributed by Dr. J. W. Griesinger, Soldiers' Home Washington, D. C.

Calculus.—Specimen 14402, portions of calculi weighing altogether 2½ ounces, composed mainly of triple phosphates; removed by Dr. W. P. Carr, Washington, D. C., from the urinary bladder of a man age, 19 years, who had a serious accident when quite young, and sometime afterwards the head and part of the shaft of the femur were removed by Dr. James Kerr, of Washington. Contributed by Dr. Llewellin Eliot, Washington, D. C.

Osteitis deformans.—Three specimens from Eskimos, contributed by Dr. A. Hrdlicka, United States National Museum, Washington, D. C. Specimen 14416, vertebrae; 14412 and 14413, femur and tibia; and 14411, ulna.

Osteosarcoma.—Specimen 14410, bones of leg showing osteosarcoma; removed from soldier, age 19. Contributed by Capt. H. J. Nichols, Medical Corps, United States Army.

Miscellaneous specimens—Mosquitoes.—Specimen 4075, wax model of anopheles maculipennis, enlarged 28 times. Purchased. Specimens 4078 to 4080, wax models of eggs, larvæ and pupa of anopheles maculipennis and larvæ, pupa and proboscis of culex, much enlarged. Purchased. Specimen 4134, a frame made in Mindanao, P. I., to catch mosquitoes. Contributed by Maj. E. L. Munson, Medical Corps, United States Army.

Instruments.—A series of instruments from the estate of the late Dr. T. C. Smith, Washington, D. C. Contributed by his son, Dr. H. M. Smith, Washington, D. C.

Flag.—A large Red Cross flag. Contributed by Mrs. C. C. McCulloch.

DENTAL AND ORAL DISEASES.

TABLE No. 47.—*Dental and oral diseases, year 1914, officers and enlisted men.*

	Cases admitted to treatment.		Operations performed.	
	Number.	Ratio.	Number.	Ratio.
United States (continental), exclusive of Alaska	80,835	1,256.04	98,209	1,526.01
Philippine Department	15,978	1,002.20	20,128	1,262.50
Hawaiian Department	14,654	1,772.38	17,494	2,115.87
Canal Zone, Panama	1,998	962.43	2,819	1,357.90
Expeditionary force, Vera Cruz, Mexico	1,227	510.82	2,552	1,062.45
China	1,288	1,180.57	1,163	1,065.99
Porto Rico	1,008	1,425.74	1,105	1,562.94
Total	116,988	1,233.48	143,470	1,512.69

DENTAL CARIES—NUMBER OF TEETH TREATED.

	White troops.		Colored troops.		Philippine Scouts.		Porto Rican troops.		Total.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
United States (continental), exclusive of Alaska	44,654	714.13	709	387.86	.....	.....	.....	.....	45,363	704.87
Philippine Department	7,044	778.77	796	423.86	1,975	393.43	.....	.....	9,815	615.63
Hawaiian Department	7,460	1,139.11	2,361	1,373.47	.....	.....	.....	.....	9,821	1,187.83
Canal Zone, Panama	1,242	598.27	.....	.....	.....	.....	.....	.....	1,242	598.27
Expeditionary force, Vera Cruzo, Mexico	997	415.07	.....	.....	.....	.....	.....	.....	997	415.07
China	791	725.02	.....	.....	.....	.....	.....	.....	791	725.02
Porto Rico	.....	.....	.....	.....	.....	.....	616	871.29	616	871.29
Total	62,188	743.06	3,866	712.63	1,975	393.43	616	871.29	68,645	723.77

RECRUITING.

AMERICAN TROOPS.

The movement of recruits is shown in Table No. 48. There were 57,244 examined by medical officers, as compared with 36,822 for the preceding year. Of each 1,000 examined, 106.60 were rejected and 24.46 declined enlistment, as compared with 134.49 and 30.85 for 1913. Of each 1,000 examined by medical officers, 868.94 were accepted, as compared with 834.66 for 1913. Of the number examined and enlisted, 366.32 per 1,000 were reenlistments and 502.62 were original enlistments, as compared with 287.60 and 547.06 for 1913.

TABLE No. 48.—*Movement of recruits, white and colored, 1914.*

	White.		Colored.		Total.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Examined by medical officers	53,970	1,000.00	3,274	1,000.00	57,244	1,000.00
Accepted by medical officers	46,887	868.76	2,855	872.02	49,742	868.94
By first enlistment	27,198	503.94	1,574	480.76	28,772	502.62
By all other enlistments	19,689	364.82	1,281	391.26	20,970	366.32
Rejected by medical officers	5,717	105.93	385	117.60	6,102	106.60
Declined	1,366	25.31	34	10.38	1,400	24.46

TABLE No. 49.—*Nativities of accepted recruits, white and colored, year 1914.*

	Accepted recruits, 1914.			
	Total accepted.		Accepted, first enlistment.	
	Number.	Ratio per 1,000 of total accepted.	Number.	Ratio per 1,000 of all first enlistments.
United States:				
White	39,236	788.80	23,987	798.94
Colored	2,855	57.40	1,574	54.71
Total native born	42,091	846.20	24,561	853.65
Russia	1,495	30.05	1,021	35.48
Germany	1,204	24.20	497	17.27
Austria	1,052	21.15	747	25.95
Ireland	964	19.38	289	10.04
England	446	8.97	213	7.40
Hungary	432	8.68	299	10.39
Italy	392	7.88	286	9.94
Scandinavia	357	7.18	145	5.04
Canada	319	6.42	134	4.66
Denmark	203	4.08	102	3.55
Turkey	115	2.31	91	3.17
Scotland	107	2.15	49	1.70
Switzerland	99	1.99	42	1.46
Holland	82	1.65	51	1.77
Greece	72	1.45	54	1.88
Roumania	60	1.21	35	1.22
France	44	.88	24	.83
Australia	36	.72	18	.63
Belgium	33	.66	25	.87
West Indies	26	.52	16	.56
Bulgaria	17	.34	14	.49
Spain	15	.30	8	.28
Portugal	12	.24	6	.21
Others	69	1.39	45	1.56
Total foreign born	7,651	153.80	4,211	146.35
Grand total	49,742	1,000.00	28,772	1,000.00

TABLE No. 50.—*Ages of recruits, white and colored, and the proportion at each age, year 1914, per 1,000 accepted.*

	White.		Colored.		Total.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
18 years and under	2,859	60.99	131	45.89	2,990	60.11
19 years	1,855	39.56	105	36.78	1,960	39.40
20 years	1,040	22.18	52	18.21	1,092	21.95
21 years	8,988	191.70	392	137.30	9,380	188.58
22 years	4,542	96.88	278	97.37	4,820	96.90
23 years	2,586	55.13	167	58.49	2,753	55.34
24 years	3,907	83.32	197	69.00	4,104	82.50
25 years	2,819	60.12	160	56.04	2,979	59.89
26 years	2,063	44.00	121	42.38	2,184	43.91
27 years	2,266	48.33	120	42.03	2,386	47.97
28 years	1,812	38.65	122	42.73	1,934	38.88
29 years	1,356	28.92	77	26.97	1,433	28.81
30 years	1,343	28.64	106	37.13	1,449	29.13
31 years	1,178	25.13	77	26.97	1,255	25.23
32 years	999	21.31	71	24.87	1,070	21.51
33 years	953	20.33	68	23.82	1,021	20.52
34 years	917	19.56	94	32.93	1,011	20.33
35 years	655	13.97	78	27.32	733	14.74
36 years	648	13.82	58	20.32	706	14.19
37 years	663	14.14	77	26.97	740	14.88
38 years	520	11.09	74	25.92	594	11.94
39 years	490	10.45	39	13.66	529	10.64
40 years and over	2,428	51.78	191	66.90	2,619	52.65
Total	46,887	1,000.00	2,855	1,000.00	49,742	1,000.00

The proportion of accepted recruits, 24 years of age and under, was 544.78 as against 579.78 in 1913. The greatest number was enlisted at 21 years of age, 9,380, and 4,820 at 22 years, the two ages combined giving 285.48 per 1,000 of all enlistments in the year.

TABLE No. 51.—*Relation of height to age.*

ABSOLUTE NUMBERS—WHITE RECRUITS, 1914.

Height.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
5 feet 1 inch and under		2		3	3				5	13
5 feet 2 inches	4	4	3	5	2	2	1	2	15	38
5 feet 3 inches	46	43	27	88	45	34	47	30	174	534
5 feet 4 inches	239	165	102	591	286	184	252	198	1,186	3,203
5 feet 5 inches	405	224	148	892	417	278	395	301	1,886	4,946
5 feet 6 inches	529	335	156	1,297	636	386	541	428	2,865	7,173
5 feet 7 inches	513	321	193	1,491	776	416	672	426	2,991	7,799
5 feet 8 inches	471	273	166	1,561	805	416	686	501	3,096	7,975
5 feet 9 inches	311	225	105	1,276	622	359	510	356	2,458	6,222
5 feet 10 inches	193	144	72	892	464	228	365	288	1,624	4,270
5 feet 11 inches	78	62	32	494	270	142	201	144	861	2,284
6 feet	47	37	21	254	135	89	155	95	751	1,584
6 feet 1 inch	18	11	8	103	54	31	53	34	239	551
6 feet 2 inches and over	5	9	7	41	27	21	29	16	140	295
Total	2,859	1,855	1,040	8,988	4,542	2,586	3,907	2,819	18,291	46,887

TABLE No. 51.—*Relation of height to age*—Continued.

PROPORTIONAL NUMBERS—WHITE RECRUITS, 1914.

Height.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
5 feet 1 inch and under	.....	1.08	.....	0.33	0.66	.....	.....	.....	0.27	0.28
5 feet 2 inches	1.40	2.16	2.88	.56	.44	0.77	0.26	0.71	.82	.81
5 feet 3 inches	16.09	23.18	25.96	9.79	9.91	13.15	12.03	10.64	9.51	11.39
5 feet 4 inches	83.60	88.95	98.08	65.75	62.97	71.15	64.50	70.24	64.84	68.31
5 feet 5 inches	141.66	120.75	142.31	99.24	91.81	107.50	101.10	106.78	103.11	105.49
5 feet 6 inches	185.03	180.59	150.00	144.30	140.03	149.27	138.47	151.83	156.63	152.98
5 feet 7 inches	179.43	173.05	185.58	165.89	170.85	160.87	172.00	151.12	163.53	166.33
5 feet 8 inches	164.74	147.17	159.62	173.68	177.23	160.87	175.58	177.72	169.26	170.09
5 feet 9 inches	108.78	121.29	100.96	141.97	136.94	138.82	130.53	126.29	134.38	132.70
5 feet 10 inches	67.51	77.63	69.23	99.24	102.16	88.17	93.42	102.16	88.79	91.07
5 feet 11 inches	27.28	33.42	30.77	54.96	59.45	54.91	51.45	51.08	47.07	48.71
6 feet	16.44	19.95	20.19	28.26	29.72	34.42	39.67	33.70	41.06	33.78
6 feet 1 inch	6.30	5.93	7.69	11.46	11.89	11.99	13.57	12.06	13.07	11.75
6 feet 2 inches and over	1.75	4.85	6.73	4.56	5.94	8.12	7.42	5.68	7.65	6.29
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

TABLE No. 52.—*Relation of height to age.*

ABSOLUTE NUMBERS—COLORED RECRUITS, 1914.

Height.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
5 feet 1 inch and under	1	.....	.....	.....	.....	.....	.....	.....	1	2
5 feet 2 inches	.....	.....	.....	.....	.....	.....	.....	.....	1	1
5 feet 3 inches	2	4	.....	3	1	2	1	2	10	25
5 feet 4 inches	15	15	11	25	11	8	15	9	85	194
5 feet 5 inches	30	9	8	41	38	23	23	26	166	364
5 feet 6 inches	24	14	5	61	59	27	29	24	235	478
5 feet 7 inches	24	24	12	65	39	23	29	26	240	482
5 feet 8 inches	15	15	8	74	43	29	37	35	222	478
5 feet 9 inches	13	9	4	63	47	32	27	18	182	395
5 feet 10 inches	6	9	1	32	21	13	16	10	89	197
5 feet 11 inches	1	5	2	17	11	5	9	5	76	131
6 feet	.....	.....	.....	8	3	4	7	5	45	72
6 feet 1 inch	.....	1	1	3	4	1	2	.....	15	27
6 feet 2 inches and over	.....	.....	.....	.....	1	.....	2	.....	6	9
Total	131	105	52	392	278	167	197	160	1,373	2,855

PROPORTIONAL NUMBERS—COLORED RECRUITS, 1914.

5 feet 1 inch and under	7.63	.....	.....	.....	.....	.....	.....	.....	0.73	0.70
5 feet 2 inches	.....	.....	.....	.....	.....	.....	.....	.....	.73	.35
5 feet 3 inches	15.27	38.10	.....	7.65	3.59	11.97	5.08	12.50	7.28	8.76
5 feet 4 inches	114.50	142.86	211.54	63.78	39.57	47.90	76.14	56.25	61.91	67.96
5 feet 5 inches	229.01	85.72	153.82	104.60	136.70	137.73	116.75	162.50	120.90	127.50
5 feet 6 inches	183.20	133.33	96.16	155.61	212.23	161.68	147.21	150.00	171.16	167.42
5 feet 7 inches	183.20	228.57	230.77	165.81	140.29	137.73	147.21	162.50	174.80	168.83
5 feet 8 inches	114.50	142.86	153.82	188.80	154.67	173.66	187.81	218.75	161.70	167.42
5 feet 9 inches	99.24	85.72	76.93	160.71	169.06	191.62	137.06	112.50	132.56	138.35
5 feet 10 inches	45.80	85.72	19.24	81.62	75.54	77.85	81.22	62.50	64.83	69.00
5 feet 11 inches	7.63	47.62	38.46	43.37	39.57	29.94	45.68	31.25	55.33	45.89
6 feet	.....	.....	.....	20.41	10.79	23.95	35.53	31.25	32.78	25.22
6 feet 1 inch	.....	9.52	19.24	7.65	14.39	5.99	10.15	.....	10.93	9.46
6 feet 2 inches and over	.....	.....	.....	.....	3.59	.....	10.15	.....	4.37	3.15
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

It will be noted that 49.44 per cent of the white recruits were 5 feet 8 inches or over and 1.25 per cent were under the minimum height as compared with 48.38 and 1.42, respectively, for the previous year.

For colored recruits 45.85 were 5 feet 8 inches or over and 0.98 per cent were under the minimum height as compared with 46.62 and 1.50 last year.

The average height for recruits was 5 feet 7.56 inches as compared with 5 feet 7.54 inches last year.

TABLE No. 53.—*Relation of weight to age.*

ABSOLUTE NUMBERS—WHITE RECRUITS, 1914.

Weight.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
119 pounds and under	131	70	29	123	51	31	43	33	238	749
120 to 124 pounds	447	236	128	604	267	135	171	135	659	2,782
125 to 129 pounds	484	314	188	1,051	415	214	340	244	1,186	4,439
130 to 134 pounds	528	327	152	1,312	598	320	448	323	1,640	5,648
135 to 139 pounds	426	300	157	1,346	655	348	511	393	2,061	6,197
140 to 144 pounds	339	220	131	1,320	671	405	548	399	2,315	6,348
145 to 149 pounds	222	160	80	1,081	599	328	508	344	2,038	5,360
150 to 154 pounds	133	92	75	837	465	275	423	325	1,844	4,467
155 to 159 pounds	70	63	48	509	288	205	305	205	1,450	3,147
160 to 164 pounds	34	36	20	336	198	122	214	142	1,151	2,253
165 to 169 pounds	30	19	5	190	147	77	152	116	1,027	1,763
170 to 174 pounds	8	8	13	127	94	60	109	58	708	1,180
175 to 179 pounds	3	3	3	58	37	31	59	40	553	787
180 pounds and over	4	7	11	91	57	35	76	65	1,421	1,767
Total	2,859	1,855	1,040	8,988	4,542	2,586	3,907	2,819	18,291	46,887

PROPORTIONAL NUMBERS—WHITE RECRUITS, 1914.

119 pounds and under	45.82	37.74	27.88	13.69	11.23	11.99	11.00	11.71	13.01	15.97
120 to 124 pounds	156.34	127.22	123.08	67.20	58.78	52.20	43.76	47.89	36.03	59.34
125 to 129 pounds	169.30	169.27	180.77	117.27	91.37	82.75	87.05	86.56	64.84	94.68
130 to 134 pounds	184.68	176.28	146.15	145.95	131.66	123.74	114.67	114.58	89.66	120.46
135 to 139 pounds	149.01	161.72	150.93	149.75	144.21	134.57	130.80	139.41	112.68	132.16
140 to 144 pounds	118.57	118.60	125.96	146.86	147.73	156.61	140.26	141.51	126.57	135.40
145 to 149 pounds	77.65	86.25	76.92	120.27	131.88	126.84	130.05	122.03	111.42	114.32
150 to 154 pounds	46.52	49.60	72.12	93.12	102.38	106.34	108.27	114.58	100.81	95.28
155 to 159 pounds	24.48	33.96	46.15	56.66	63.41	79.27	78.09	74.14	79.28	67.12
160 to 164 pounds	11.89	19.41	19.23	37.38	43.60	47.18	54.77	50.37	62.93	48.05
165 to 169 pounds	10.49	10.24	4.81	21.14	32.37	29.78	38.99	41.15	56.15	37.60
170 to 174 pounds	2.80	4.31	12.50	14.13	20.70	23.20	27.98	28.80	38.71	25.17
175 to 179 pounds	1.05	1.62	2.90	6.45	8.15	11.99	15.10	14.19	30.24	16.78
180 pounds and over	1.40	3.77	10.59	10.12	12.55	13.54	19.45	23.06	77.69	37.68
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

TABLE No. 54.—*Relation of weight to age.*

ABSOLUTE NUMBER—COLORED RECRUITS, 1914.

Weight.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
119 pounds and under	6	5	2	6	.....	.....	2	1	9	31
120 to 124 pounds	24	8	4	20	8	5	4	1	16	90
125 to 129 pounds	29	12	6	28	30	12	11	8	55	191
130 to 134 pounds	21	15	14	60	30	21	17	18	113	309
135 to 139 pounds	21	24	8	61	37	19	11	22	131	334
140 to 144 pounds	10	15	5	61	45	23	27	21	152	359
145 to 149 pounds	10	15	4	43	38	23	36	19	152	340
150 to 154 pounds	6	4	4	42	34	18	30	26	149	313
155 to 159 pounds	2	1	4	35	23	20	15	13	141	254
160 to 164 pounds	1	2	1	13	9	11	15	14	124	190
165 to 169 pounds	.....	1	.....	13	13	7	11	7	116	168
170 to 174 pounds	1	2	.....	6	6	6	10	3	79	113
175 to 179 pounds	.....	.....	.....	2	2	1	5	1	43	54
180 pounds and over	.....	1	.....	2	3	1	3	6	93	109
Total	131	105	52	392	278	167	197	160	1,373	2,855

TABLE No. 54.—*Relation of weight to age*—Continued.

PROPORTIONAL NUMBERS—COLORED RECRUITS, 1914.

Weight.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
119 pounds and under	45.81	47.62	38.46	15.31	.....	.....	10.15	6.25	6.56	10.86
120 to 124 pounds	183.20	76.20	76.92	51.02	28.78	29.94	20.30	6.25	11.65	31.52
125 to 129 pounds	221.38	114.28	115.39	71.43	107.91	71.86	55.84	50.00	40.06	66.90
130 to 134 pounds	160.31	142.86	269.24	153.06	107.91	125.75	86.30	112.50	82.30	108.23
135 to 139 pounds	160.31	228.57	153.82	155.61	133.10	113.77	55.84	137.50	95.42	116.99
140 to 144 pounds	76.34	142.86	96.16	155.61	161.87	137.73	137.06	131.25	110.71	125.75
145 to 149 pounds	76.34	142.86	76.92	109.69	136.70	137.73	182.74	118.75	110.71	119.10
150 to 154 pounds	45.80	38.10	76.92	107.14	122.30	107.78	152.29	162.50	108.52	109.63
155 to 159 pounds	15.27	9.52	76.92	89.28	82.74	119.76	76.14	81.25	102.70	88.97
160 to 164 pounds	7.63	19.05	19.23	33.16	32.38	65.87	76.14	87.50	90.32	66.50
165 to 169 pounds	.....	9.52	.....	33.16	46.76	41.92	55.84	43.75	84.49	58.85
170 to 174 pounds	7.63	19.05	.....	15.31	21.58	35.93	50.77	18.75	57.54	39.58
175 to 179 pounds	.....	.....	.....	5.10	7.19	5.99	25.38	6.25	31.32	18.92
180 pounds and over	.....	9.52	.....	5.10	10.79	5.99	15.23	37.50	67.72	38.18
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

The average weight of all recruits was 145.04; of the white troops 57.74 per cent weighed 140 pounds or over, and 1.60 per cent weighed less than the minimum, 120 pounds, as compared with 55.96 and 2.06 for 1913. Of the colored troops 66.55 per cent weighed 140 pounds or over, while 1.09 per cent weighed less than the minimum, 120 pounds, as compared with 66.67 and 1.27, respectively, for 1913.

TABLE No. 55.—*Relation of chest measurement to age.*

ABSOLUTE NUMBERS—WHITE RECRUITS, 1914.

Chest measurement.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
30 inches and under	883	463	212	1,057	389	190	193	173	582	4,142
31 inches	667	405	233	1,357	619	292	387	275	1,274	5,509
32 inches	631	456	225	2,103	966	554	699	520	2,581	8,738
33 inches	395	301	202	1,956	1,002	607	918	617	3,308	9,306
34 inches	187	146	105	1,350	765	461	753	548	3,337	7,652
35 inches	64	55	38	704	472	262	509	362	2,713	5,179
36 inches	21	22	14	317	218	142	281	193	1,928	3,136
37 inches	7	1	10	95	68	51	103	73	1,062	1,470
38 inches	1	4	.....	39	33	22	40	34	732	905
39 inches and over	.....	2	1	10	10	5	24	24	774	850
Total	2,859	1,855	1,040	8,988	4,542	2,586	3,907	2,819	18,291	46,887

PROPORTIONAL NUMBERS—WHITE RECRUITS, 1914.

30 inches and under	308.84	249.60	203.85	117.60	85.63	73.47	49.40	61.37	31.82	88.25
31 inches	233.30	218.33	223.04	150.98	136.30	112.92	99.05	97.55	69.65	117.50
32 inches	221.76	245.83	216.35	233.98	212.68	214.23	178.90	184.43	141.11	186.38
33 inches	138.16	162.26	194.23	217.62	220.61	234.73	234.97	218.87	180.90	198.50
34 inches	65.41	78.71	100.96	150.20	168.42	178.26	192.72	194.40	182.40	163.21
35 inches	22.39	29.65	36.54	78.33	103.92	101.31	130.28	128.42	148.33	110.50
36 inches	7.35	11.86	13.46	35.27	48.00	54.91	71.92	68.47	105.39	66.88
37 inches	2.45	.54	9.62	10.57	14.97	19.72	26.36	25.90	58.06	31.35
38 inches	.35	2.16	.....	4.34	7.27	8.51	10.24	12.06	40.02	19.30
39 inches and over	.....	1.08	.96	1.11	2.20	1.93	6.14	8.51	42.32	18.13
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

TABLE No. 56.—*Relation of chest measurement to age.*

ABSOLUTE NUMBERS—COLORED RECRUITS, 1914.

Chest measurement.	Age.									Total.
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	
30 inches and under.	56	22	13	56	23	13	8	6	32	229
31 inches	31	33	11	87	55	23	12	17	96	365
32 inches	30	26	11	103	61	40	48	36	217	572
33 inches	12	14	9	72	66	52	45	34	263	567
34 inches	1	5	6	42	46	21	37	38	272	468
35 inches	1	4	1	21	20	10	25	16	223	321
36 inches	.....	1	1	7	4	4	18	7	119	161
37 inches	.....	.....	.....	3	3	2	2	4	88	102
38 inches	.....	.....	.....	1	.....	2	.....	1	38	42
39 inches and over	.....	.....	.....	.....	.....	.....	2	1	25	28
Total	131	105	52	392	278	167	197	160	1,373	2,855

PROPORTIONAL NUMBERS—COLORED RECRUITS, 1914.

30 inches and under.	427.48	209.52	250.00	142.86	82.73	77.85	40.61	37.50	23.31	80.21
31 inches	236.64	314.30	211.54	221.94	197.84	137.73	60.91	106.25	69.91	127.85
32 inches	229.01	247.62	211.54	262.76	219.43	239.52	243.67	225.00	158.03	200.35
33 inches	91.61	133.33	173.08	183.66	237.42	311.38	228.43	212.50	191.55	198.60
34 inches	7.63	47.62	115.39	107.14	165.48	125.75	187.81	237.50	198.10	163.93
35 inches	7.63	38.10	19.23	53.57	71.94	59.88	126.91	100.00	162.41	112.43
36 inches	.....	9.52	19.23	17.86	14.39	23.95	91.37	43.75	86.68	56.39
37 inches	.....	.....	.....	7.65	10.79	11.98	10.15	25.00	64.10	35.73
38 inches	.....	.....	.....	2.55	.....	11.98	.....	6.25	27.68	14.71
39 inches and over	.....	.....	.....	.....	.....	.....	10.15	6.25	18.21	9.81
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

The chest measurement of 40.94 per cent of the white recruits was 34 inches and over and 8.82 per cent were 30 inches and under, as compared with 40.75 and 8.30, respectively, for the preceding year. The chest measurements for colored recruits show 39.30 per cent 34 inches or over, and 8.02 per cent were 30 inches and under, as compared with 39.98 and 8.79, respectively, for 1913.

TABLE No. 57.—*Causes of rejection, by medical officers of the Army, of candidates examined for enlistment, 1914.*

Causes of rejection.	Total.		White.						Colored.	
			Native born.		Foreign born.		Total.			
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Venereal diseases	753	123.40	550	118.18	67	63.04	617	107.92	136	353.25
Diseases of the ear, including defects of hearing	549	89.97	424	91.10	112	105.36	536	93.76	13	33.77
Diseases of the eye, including defects of vision	407	66.70	318	68.33	69	64.92	387	67.70	20	51.95
Heart disease	386	63.26	308	66.17	57	63.62	365	63.85	21	54.55
Flat feet	288	47.20	207	44.48	67	63.04	274	47.93	14	36.37
Alcoholism	222	36.38	187	40.18	33	31.05	220	38.48	2	5.19
Hernia	220	36.05	186	39.97	21	19.76	207	36.21	13	33.77
Diseases of the organs of locomotion, except spinal curvature	177	29.01	149	32.02	24	22.58	173	30.26	4	10.39
Diseases of the respiratory system	159	26.06	129	27.72	26	24.46	155	27.11	4	10.39
Diseases of the genito-urinary system, non-venereal	156	25.57	121	26.00	25	23.52	146	25.54	10	25.98
Defects of development, except as shown in detail	147	24.09	112	24.07	26	24.46	138	24.14	9	23.38
Defective teeth	119	19.50	90	19.34	20	18.82	110	19.24	9	23.38
Weakness of mind	116	19.01	91	19.55	23	21.64	114	19.94	2	5.19
Diseases of the skin	107	17.53	81	17.40	19	17.87	100	17.49	7	18.18
Under weight	103	16.88	83	17.84	14	13.17	97	16.97	6	15.59
Varicose veins	91	14.91	62	13.32	25	23.52	87	15.22	4	10.39
Tuberculosis	89	14.59	74	15.90	11	10.35	85	14.87	4	10.39
Diseases of the nervous system, except as shown in detail	83	13.60	68	14.61	12	11.29	80	13.99	3	7.79
General diseases, except as shown in detail	74	12.13	60	12.89	11	10.35	71	12.42	3	7.79
Curvature of the spine	54	8.85	44	9.45	8	7.53	52	9.10	2	5.19
Diseases of the digestive system, except as shown in detail	38	6.23	33	7.09	3	2.82	36	6.29	2	5.19
Chest development insufficient	35	5.74	31	6.66	4	3.76	35	6.12	.....	.....
Varicocele	33	5.41	25	5.37	5	4.70	30	5.25	3	7.79
Physical debility	27	4.42	25	5.37	.....	.....	25	4.37	2	5.19
Hemorrhoids	23	3.77	14	3.01	7	6.59	21	3.67	2	5.19
Under height	21	3.44	15	3.22	3	2.82	18	3.15	3	7.79
Over weight and obesity	16	2.62	12	2.58	4	3.76	16	2.79	.....	.....
Diseases of the circulating system, except as shown in detail	10	1.64	10	2.15	.....	.....	10	1.75	.....	.....
Over height	3	.49	3	.65	.....	.....	3	.52	.....	.....
Injuries	193	31.63	158	33.95	27	25.40	185	32.36	8	20.78
Rejected for causes physical and mental	4,699	770.08	3,670	788.57	723	680.20	4,393	768.41	306	794.81
Rejected for causes not physical	1,403	229.92	984	211.43	340	319.80	1,324	231.59	79	205.19
Total rejected	6,102	1,000.00	4,654	1,000.00	1,063	1,000.00	5,717	1,000.00	385	1,000.00

Venereal diseases caused the greatest number of rejections this year, as in 1911 and 1912; it occupied only third place in 1913. This cause of rejection for whites gave a rate of 107.92 per 1,000 and for colored 353.25, or more than three times as great as for the whites.

TABLE No. 58.—*Principal occupations of recruits, first enlistment, 1914.*

Occupation.	Number in each case.			Occupation.	Number in each case.		
	Total.	White.	Colored.		Total.	White.	Colored.
Laborers	10,190	9,213	977	Hatters	37	37	.....
Farmers	3,487	3,409	78	Tobacco workers	35	32	.....
Clerks and bookkeepers	1,706	1,693	13	Conductors	34	34	.....
Drivers and stablemen	1,272	1,216	56	Glass workers	32	32	.....
Machinists	1,018	1,010	8	Laundrymen	30	30	.....
Carpenters	637	624	13	Photographers	30	30	.....
Firemen	634	620	14	Coopers	27	25	2
Cooks	621	534	87	Merchants	27	26	1
Electricians	592	587	5	Cement workers	25	24	1
Miners	576	555	21	Core makers	22	21	1
Painters	552	535	17	Designers and decorators	21	20	1
Chauffers	379	350	29	Gardeners	21	20	1
Plumbers	379	376	3	Inspectors	21	19	2
Waiters	323	264	59	Silk workers	21	21	.....
Tailors	312	297	15	Agents	20	20	.....
Musicians	289	283	6	Bartenders	19	19	.....
Printers and bookbinders	284	279	5	Roofers	19	19	.....
Barbers	279	263	16	Bridge workers	18	18	.....
Salesmen	270	270	.....	Confectioners	18	18	.....
Engineers	267	263	4	Auto workers	17	15	2
Blacksmiths and horseshoers	258	252	6	Florists	17	17	.....
Bakers	231	229	2	Brass workers	16	16	.....
Sailors	222	219	3	Actors	15	15	.....
Railroad hands	214	210	4	Knitters	15	15	.....
Telegraphers	213	213	.....	Box makers	14	14	.....
Mechanics	212	207	5	Dentists	13	13	.....
Mill workers	183	181	2	Rubber workers	13	13	.....
Butchers	177	173	4	Soldiers	13	13	.....
Shoemakers	176	173	3	Button makers	12	12	.....
Metal workers	175	175	.....	Dairymen	12	12	.....
Porters	168	96	72	Upholsterers	11	11	.....
Linemen	159	159	.....	Embroiderers	10	10	.....
Molders	125	120	5	Fishermen	10	10	.....
Weavers	112	111	1	Oilers	10	10	.....
Masons, brick and stone	105	101	4	Undertakers	10	9	1
Nurses	100	100	.....	Moving picture operators	9	8	1
Tinners	89	87	2	Cranemen	8	8	.....
Boiler makers	79	77	2	Dyers	8	8	.....
Lumbermen	68	67	1	Foremen	8	8	.....
Students	66	61	5	Furriers	8	8	.....
Stenographers	62	62	.....	Wheelwrights	8	8	.....
Furniture workers	61	61	.....	Ball players	6	5	1
Jewelers	56	56	.....	Chemists	6	6	.....
Druggists	55	54	1	Drillers	6	6	.....
Civil engineers and surveyors	54	54	.....	Policemen	6	6	.....
Motormen	46	46	.....	Aviators	4	4	.....
Packers	43	43	.....	Broom makers	4	4	.....
Leather workers	42	42	.....	Doctors	4	4	.....
Paper workers	41	41	.....	Locksmiths	4	4	.....
Teachers	41	41	.....	Wireless operators	4	4	.....
Plasterers and lathers	39	36	3	Lithographers	3	3	.....
Draftsmen	37	37	.....	Miscellaneous	215	209	6
				Total	28,772	27,198	1,574

PHILIPPINE SCOUTS.

The proportion of Filipinos accepted to all of those examined by medical officers in the year was 90.88, as compared with 94.80 last year. The total number examined being 3,521 in 1914 and 1,616 in 1913.

TABLE No. 59.—*Examination of Philippine applicants for enlistment, year 1914.*

	Number.	Ratio per 1,000 examined.
Examined by medical officers	3,521	1,000 00
Accepted by medical officers	3,200	908 84
By first enlistment	1,514	430 00
Other enlistments	1,686	478 84
Rejected by medical officers	282	80 09
Declined	39	11 07

TABLE No. 60.—*Philippine recruits (accepted).*

	Number.	Ratio.		Number.	Ratio.
18 years and under	126	39.37	31 years	143	44.69
19 years	100	31.25	32 years	130	40.63
20 years	88	27.50	33 years	100	31.25
21 years	579	180.94	34 years	78	24.38
22 years	203	63.44	35 years	58	18.13
23 years	140	43.75	36 years	35	10.94
24 years	224	70.00	37 years	31	9.68
25 years	199	62.19	38 years	18	5.62
26 years	137	42.82	39 years	11	3.43
27 years	280	87.50	40 years and over	34	10.62
28 years	169	52.81			
29 years	113	35.30	Total	3,200	1,000.00
30 years	204	63.76			

TABLE No. 61.—*Philippine recruits—Relation of height to age.*

ABSOLUTE NUMBERS, 1914.

Height.	Age.									
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	Total.
4 feet 11 inches	1	2	1	10	2	.....	4	1	17	38
5 feet	5	8	3	39	12	12	16	7	70	172
5 feet 1 inch	21	15	18	69	25	17	19	21	157	362
5 feet 2 inches	26	16	12	108	38	20	43	41	239	550
5 feet 3 inches	26	17	19	115	38	28	38	40	310	631
5 feet 4 inches	24	18	14	93	29	23	40	41	284	566
5 feet 5 inches	9	7	8	58	28	18	35	26	215	404
5 feet 6 inches	7	11	6	39	16	6	15	18	125	243
5 feet 7 inches	2	4	3	26	3	2	9	2	79	130
5 feet 8 inches	1	2	3	10	9	2	2	1	28	58
5 feet 9 inches	.....	.....	.....	6	.....	4	1	1	7	19
5 feet 10 inches	1	.....	.....	5	2	1	1	.....	6	16
5 feet 11 inches and over	3	.....	.....	1	1	1	1	.....	4	11
Total	126	100	88	579	203	140	224	199	1,541	3,200

PROPORTIONAL NUMBERS, 1914.

4 feet 11 inches	7.94	20.00	11.36	17.27	9.84	.....	17.86	5.02	11.03	11.86
5 feet	39.68	80.00	34.09	67.30	59.12	85.72	71.42	35.18	45.43	53.76
5 feet 1 inch	166.66	150.00	204.54	119.17	123.15	121.43	84.82	105.53	101.88	113.12
5 feet 2 inches	206.35	160.00	147.70	186.53	187.20	185.72	191.97	206.03	155.10	171.88
5 feet 3 inches	206.35	170.00	215.91	198.62	187.20	200.00	169.65	201.01	201.17	197.19
5 feet 4 inches	190.48	180.00	159.09	160.63	142.86	164.30	178.57	206.03	184.30	176.88
5 feet 5 inches	71.42	70.00	90.91	100.17	137.93	128.57	156.23	130.66	139.52	126.25
5 feet 6 inches	55.56	110.00	68.18	67.36	78.82	42.86	66.97	90.40	81.12	75.94
5 feet 7 inches	15.87	40.00	34.09	44.91	14.78	14.29	40.18	10.04	51.27	40.63
5 feet 8 inches	7.94	20.00	34.09	17.27	44.34	14.29	8.93	5.02	18.17	18.13
5 feet 9 inches	.....	.....	.....	10.36	.....	28.57	4.46	5.02	4.54	5.94
5 feet 10 inches	7.94	.....	.....	8.64	9.84	7.13	4.46	.....	3.89	5.00
5 feet 11 inches and over	23.81	.....	.....	1.72	4.93	7.13	4.46	.....	2.59	3.44
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

Fifty-three and seventy-eight one hundredths of 1 per cent (53.78) of all recruits accepted were below the minimum standard for American soldiers, 5 feet 4 inches, while only 3.25 per cent were above the average height of American recruits, 5 feet 7 inches.

TABLE NO. 62.—*Philippine recruits—Relation of weight to age.*

ABSOLUTE NUMBERS, 1914.

Weight.	Age.									
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	Total.
99 pounds and under	4	.....	1	4	1	1	3	1	24	39
100 to 104 pounds	20	18	10	77	18	10	22	12	133	320
105 to 109 pounds	26	13	17	114	35	22	29	23	188	467
110 to 114 pounds	36	17	15	129	40	27	35	47	289	635
115 to 119 pounds	13	20	14	99	36	31	45	48	265	571
120 to 124 pounds	15	13	12	85	21	21	39	29	233	468
125 to 129 pounds	8	9	7	36	30	10	22	18	168	308
130 to 134 pounds	2	7	6	15	9	7	17	13	103	179
135 to 139 pounds	2	2	5	10	9	5	7	3	70	113
140 to 144 pounds	.....	1	1	6	2	3	4	4	34	55
145 to 149 pounds	.....	.....	.....	1	.....	1	.....	1	17	20
150 to 154 pounds	.....	.....	.....	2	1	2	1	.....	6	12
155 to 159 pounds	.....	.....	.....	.....	.....	.....	.....	.....	5	5
160 pounds and over	.....	.....	.....	1	1	.....	.....	.....	6	8
Total	126	100	88	579	203	140	224	199	1,541	3,200

PROPORTIONAL NUMBERS, 1914.

99 pounds and under	31.75	.....	11.36	6.91	4.92	7.14	13.39	5.02	15.58	12.19
100 to 104 pounds	158.74	180.00	113.63	133.00	88.66	71.44	98.22	60.31	86.31	100.00
105 to 109 pounds	206.35	130.00	193.17	196.90	172.42	157.16	129.47	115.58	122.00	145.94
110 to 114 pounds	285.71	170.00	170.48	222.80	197.04	192.85	156.23	236.19	187.54	198.44
115 to 119 pounds	103.18	200.00	159.09	170.99	177.34	221.42	200.90	241.21	171.97	178.44
120 to 124 pounds	119.05	130.00	136.36	146.80	103.46	150.01	174.09	145.73	151.20	146.25
125 to 129 pounds	63.50	90.00	79.55	62.18	147.79	71.44	98.22	90.46	109.02	96.25
130 to 134 pounds	15.87	70.00	68.18	25.91	44.34	49.99	75.89	65.32	66.81	55.92
135 to 139 pounds	15.87	20.00	56.82	17.27	44.34	35.70	31.25	15.06	45.44	35.31
140 to 144 pounds	.....	10.00	11.36	10.36	9.84	21.42	17.86	20.08	22.07	17.19
145 to 149 pounds	.....	.....	.....	1.72	.....	7.14	.....	5.02	11.03	6.25
150 to 154 pounds	.....	.....	.....	3.45	4.93	14.29	4.46	.....	3.89	3.75
155 to 159 pounds	.....	.....	.....	.....	.....	.....	.....	.....	3.25	1.56
160 pounds and over	.....	.....	.....	1.72	4.93	.....	.....	.....	3.89	2.50
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

The weight of 63.50 per cent of all recruits is less than 120 pounds, the minimum standard for American recruits. Only 1.41 per cent were of the average weight, or over, for American recruits.

TABLE NO. 63.—*Philippine recruits—Relation of chest measurement to age.*

ABSOLUTE NUMBERS, 1914.

Chest measurement.	Age.									
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	Total.
26 inches and under	1	.....	.....	1	.....	.....	1	.....	5	9
27 inches	.....	.....	.....	3	1	.....	.....	1	7	12
28 inches	5	1	5	8	2	2	4	.....	11	38
29 inches	10	15	9	46	12	9	11	12	90	214
30 inches	31	19	20	121	37	19	43	23	221	534
31 inches	47	33	20	142	41	30	51	60	388	812
32 inches	21	22	18	151	68	50	48	58	400	836
33 inches	8	6	8	74	30	15	40	36	231	448
34 inches	2	4	5	28	10	10	18	7	127	211
35 inches	.....	.....	2	3	2	4	6	2	44	63
36 inches and over	.....	.....	1	2	.....	1	2	.....	17	23
Total	126	100	88	579	203	140	224	199	1,541	3,200

TABLE No. 63.—*Philippine recruits—Relation of chest measurement to age*—Contd.

PROPORTIONAL NUMBERS, 1915.

Chest measurement.	Age.									
	18 years and under.	19 years.	20 years.	21 years.	22 years.	23 years.	24 years.	25 years.	26 years and over.	Total.
26 inches and under	15.87	.....	.....	1.73	.....	.....	4.46	.....	3.24	2.81
27 inches	.....	.....	.....	5.18	4.92	.....	.....	5.02	4.54	3.75
28 inches	39.68	10.00	56.82	13.82	9.85	14.29	17.86	.....	7.14	11.86
29 inches	79.37	150.00	102.27	79.44	59.12	64.29	49.11	60.30	58.40	66.88
30 inches	246.03	190.00	227.27	208.98	182.27	135.72	191.97	115.58	143.44	166.88
31 inches	373.02	330.00	227.27	245.25	201.97	214.29	227.68	301.51	251.79	253.73
32 inches	166.67	220.00	204.55	260.80	334.98	357.14	214.28	291.46	259.58	261.26
33 inches	63.50	60.00	90.91	127.80	147.79	107.14	178.58	180.91	149.90	140.00
34 inches	15.87	40.00	56.82	48.36	49.27	71.44	80.36	35.18	82.41	65.94
35 inches	.....	.....	22.73	5.18	9.85	28.57	26.79	10.04	28.55	19.69
36 inches and over	.....	.....	11.36	3.45	.....	7.14	8.93	.....	11.03	7.19
Total	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00

The minimum standard chest measurement for American recruits is 32 inches at expiration. Fifty and fifty-nine hundredths of 1 per cent of all Philippine recruits have a chest measurement below this standard.

Table No. 64 gives the causes for rejection among 3,521 Filipino applicants for enlistment examined by medical officers during the year.

TABLE No. 64.—*Causes of rejection of Philippine applicants for enlistment, 1914.*

Causes of rejection.	Total.		Causes of rejection.	Total.	
	Number.	Ratio per 1,000 rejected for all causes.		Number.	Ratio per 1,000 rejected for all causes.
Diseases of the eye, including defects of vision	46	163.12	Diseases of the skin	5	17.73
Tuberculosis	25	88.65	Flat feet	4	14.18
Diseases of the ear, including defects of hearing	22	78.02	Diseases of the organs of locomotion, except spinal curvature	4	14.18
Heart disease	21	74.46	Diseases of the genito-urinary system, nonvenereal	4	14.18
Venereal diseases	16	56.74	Varicose veins	4	14.18
Defects of development, except as shown in detail	16	56.74	Under height	4	14.18
Under weight	16	56.74	Diseases of the nervous system, except as shown in detail	3	10.64
General diseases, except as shown in detail	14	49.65	Defective teeth	2	7.09
Diseases of the respiratory system	12	42.56	Varicocele	2	7.09
Curvature of the spine	9	31.92	Hemorrhoids	1	3.55
Chest development insufficient	8	28.37	Over height	1	3.55
Diseases of the digestive system, except as shown in detail	7	24.82	Injuries	4	14.18
Hernia	7	24.82	Causes not physical	18	63.84
Minor	7	24.82	Total	282	1,000.00

Diseases of the eye, including defects of vision, cause 16.31 per cent of all rejections by medical officers; tuberculosis, 8.86, as compared with 12.99 last year; diseases of the ear, including defects of hearing, 7.80; and heart disease, 7.45, while venereal disease caused 5.67 this year although none were rejected for that cause in 1913. Sixteen, or 5.67 per cent, were rejected as below standard for weight, while 8, or 2.84 per cent, as having insufficient chest development.

PORTO RICAN TROOPS.

Ninety-one and four-tenths per cent of the recruits for the Porto Rican regiment examined by medical officers, were accepted, as compared with 74.6 per cent in 1913. Three hundred and seventy-four applicants were examined and 342 accepted, of which number only 69 were first enlistments. In height, 60.23 per cent were 66 inches or under and only 8.77 per cent reached the height of 69 inches; 60.23 per cent were under the average height of American recruits, 37.43 per cent weighed less than 130 pounds, and 25, or 6.41 per cent, weighed over 150 pounds. Seventy-two and twenty-two hundredths per cent had a chest measurement of 33 inches or under, and 13.45 per cent had a chest measurement of 35 inches and over as compared with 14.5 per cent for last year.

Applicants.	Number.	Ratio per 1,000 examined.
Examined by medical officers	374	1,000.00
Accepted by medical officers	342	914.44
By first enlistment	69	184.49
Other enlistments	273	729.95
Rejected by medical officers	30	80.21
Declined	2	5.35

TABLE NO. 65.—*Causes of rejection of applicants for enlistment, Porto Rican regiment, 1914.*

Causes of rejection.	Total.		Causes of rejection.	Total.	
	Number.	Ratio per 1,000 rejected for all causes.		Number.	Ratio per 1,000 rejected for all causes.
Under weight	8	266.70	Defective teeth	1	33.33
Chest development insufficient	3	100.00	Hernia	1	33.33
Diseases of the eye, including defects of vision	3	100.00	Diseases of the digestive system, except as shown in detail	1	33.33
Heart disease	2	66.67	Diseases of the organs of locomotion, except spinal curvature	1	33.33
Diseases of the genito-urinary system, nonvenereal	2	66.67	Physical debility	1	33.33
Venereal diseases	1	33.33	Flat foot	1	33.33
Varicocele	1	33.33	Minor	1	33.33
Hemorrhoids	1	33.33	Causes not physical	1	33.33
Diseases of the circulatory system, except as shown in detail	1	33.33	Total	30	1,000.00

FINANCIAL STATEMENT, 1915.[1]

Medical and Hospital Department, 1915.

Appropriated by act approved Apr. 27, 1914		$700,000.00
Refundments during the year		17.59
Total to be accounted for		700,017.59
Disbursed during the year:		
Expenses of medical supply depots	$867.84	
Medical and hospital supplies	352,035.47	
Medical attendance and medicines (except at recruiting stations)	9,806.19	
Medical expenses of recruiting (including medical attendance and medicines at recruiting stations)	5,001.45	
Pay of employees	153,506.77	
Hospital laundry	43,874.88	
Expressage	183.79	
Gas and electricity for laboratory apparatus	2,347.82	
Customs duties and internal-revenue taxes on medical supplies	781.90	
Miscellaneous	111.46	
		568,517.57
Balances on hand June 30, 1915:		
In United States Treasury	33,726.54	
In transit from disbursing officers to the Treasury	2,105.65	
In hands of disbursing officers	95,667.83	
		131,500.02
Total accounted for		700,017.59

Medical and Hospital Department, 1914.

Balances on hand July 1, 1914, acts Mar 2, 1913, and May 25, 1914		$144,450.64
Refundments during the year		37.65
Total to be accounted for		144,488.29
Disbursed during the year:		
Expenses of medical supply depots	$181.78	
Medical and hospital supplies	127,112.65	
Medical attendance and medicines (except at recruiting stations)	2,427.69	
Medical expenses of recruiting	521.82	
Pay of employees	1,798.42	
Hospital laundry	5,771.26	
Expressage	48.50	
Gas and electricity for laboratory apparatus	270.62	
Customs duties and internal-revenue taxes	56.26	
Miscellaneous	22.43	
		138,211.43
Balance on hand June 30, 1915, in United States Treasury		6,276.86
Total accounted for		144,488.29

Medical and Hospital Department, 1913.

Balance on hand July 1, 1914, act Aug. 24, 1912	$3,180.28
Refundment during the year	14.83
Total to be accounted for	3,195.11

[1] The disbursements in this statement include settlements with public creditors made by the accounting officers of the Treasury and charged to these appropriations.

Disbursed during the year:		
Medical and hospital supplies	$265.51	
Medical attendance and medicines (except at recruiting stations)	21.35	
Medical expenses of recruiting	3.00	
		$289.86
Carried to surplus fund		2,905.25

Replacing medical supplies, 1915–16 (act June 12, 1906, 34 Stats., 256).

Amounts accruing to this fund during the year:		
On account of supplies transferred to other branches of the Government		$60,050.60
On account of supplies sold		61,040.37
On account of collections for medical supplies lost or destroyed		535.20
Total to be accounted for		121,626.17
Treasury counter-transfer to Panama Canal appropriations, price of Army medical supplies returned by the canal		7.50
Balance on hand June 30, 1915, in United States Treasury		121,618.67

Replacing medical supplies, 1914–15.

Balance on hand July 1, 1914		$66,042.82
Amounts accruing to this fund during the year:		
On account of supplies transferred to other branches of the Government	$24,236.69	
On account of supplies sold	3,876.83	
On account of collections for medical supplies lost or destroyed	212.25	
		28,325.77
Total to be accounted for		94,368.59
Disbursed during the year for medical and hospital supplies		82,417.92
Treasury counter-transfer to Panama Canal appropriations, price of Army medical supplies returned by the canal		3.36
Balances on hand June 30, 1915:		
In United States Treasury	$9,365.23	
In hands of disbursing officer	2,582.08	
		11,947.31
Total accounted for		94,368.59

Replacing medical supplies, 1913–14.

Balance on hand July 1, 1914		$49.60
Amounts accruing to this fund during the year:		
On account of supplies transferred to other branches of the Government	$133.45	
On account of collections for medical supplies lost or destroyed	36.47	
		169.92
Total to be accounted for		219.52
Balance on hand June 30, 1915, in United States Treasury		219.52

Replacing medical supplies, 1912–13.

Balance on hand July 1, 1914	$7.60
Carried to surplus fund	7.60

Hospital care, Canal Zone garrisons, 1915.

Appropriated by act approved Mar. 4, 1915	$45,000.00
Balance on hand June 30, 1915, in United States Treasury	45,000.00

Library, Surgeon General's Office, 1915.

Appropriated by act approved Apr. 27, 1914		$10,000.00
Disbursed during the year		3,729.92
Balances on hand June 30, 1915:		
In United States Treasury	$3,971.29	
In hands of disbursing officer	2,298.79	
		6,270.08

Library, Surgeon General's Office, 1914.

Balances on hand July 1, 1914, act Mar. 2, 1913	$4,687.99
Disbursed during the year	4,579.64
Balance on hand June 30, 1915, in United States Treasury	108.35

Library, Surgeon General's Office, 1913.

Balance on hand July 1, 1914, act Aug. 24, 1912	$48.85
Disbursed during the year	5.50
Carried to surplus fund	43.35

Army Medical Museum, 1915.

Appropriated by act approved Apr. 27, 1914		$5,000.00
Disbursed during the year		1,775.41
Balances on hand June 30, 1915:		
In United States Treasury	$2,918.56	
In hands of disbursing officer	306.03	
		3,224.59

Army Medical Museum, 1914.

Balances on hand July 1, 1914, act Mar. 2, 1913	$2,077.77
Disbursed during the year	511.96
Balance on hand June 30, 1915, in United States Treasury	1,565.81

Army Medical Museum, 1913.

Balance on hand July 1, 1914, act Aug. 24, 1912	$332.81
Carried to surplus fund	332.81

Artificial limbs, 1915.

Appropriated by act approved Aug. 1, 1914		$275,000.00
Disbursed during the year		227,636.35
Balances on hand June 30, 1915:		
In United States Treasury	$37,462.65	
In hands of disbursing officer	9,901.00	
		47,363.65

Artificial limbs, 1914.

Balances on hand July 1, 1914, act June 23, 1913	$13,823.00
Disbursed during the year	2,776.30
Balance on hand June 30, 1915, in United States Treasury	11,046.70

Artificial limbs, 1913.

Balance on hand July 1, 1914, act Aug. 24, 1912	$13,258.31
Carried to surplus fund	13,258.31

Appliances for disabled soldiers, 1915.

Appropriated by act approved Aug. 1, 1914		$1,500.00
Disbursed during the year		702.89
Balances on hand June 30, 1915:		
In United States Treasury	$550.00	
In hands of disbursing officer	247.11	
		797.11

Appliances for disabled soldiers, 1914.

Balances on hand July 1, 1914, act June 23, 1913		$1,182.76
Disbursed during the year		92.75
Balance on hand June 30, 1915, in United States Treasury		1,090.01

Appliances for disabled soldiers, 1913.

Balance on hand July 1, 1914, act Aug. 24, 1912		$1,118.78
Carried to surplus fund		1,118.78

Trusses for disabled soldiers, 1915.

Appropriated by act approved Aug. 1, 1914		$3,500.00
Disbursed during the year		1,613.58
Balances on hand June 30, 1915:		
In United States Treasury	$1,500.00	
In hands of disbursing officer	386.42	
		1,886.42

Trusses for disabled soldiers, 1914.

Balances on hand July 1, 1914, act June 23, 1913		$2,090.91
Disbursed during the year		93.33
Balance on hand June 30, 1915, in United States Treasury		1,997.58

Trusses for disabled soldiers, 1913.

Balance on hand July 1, 1914, act Aug. 24, 1912		$2,437.20
Carried to surplus fund		2,437.20

General summary of all appropriations.

Balances on hand July 1, 1914	$254,789.32
Appropriated	1,040,000.00
Accrued to replacing funds, act June 12, 1906 (34 Stats., 256)	150,121.86
Refundments during the year	70.07
Total to be accounted for	1,444,981.25
Disbursed during the year	1,032,954.41
Countertransfers for supplies returned by Panama Canal	10.86
Carried to surplus fund	20,103.30
Balances on hand June 30, 1915	391,912.68
Total accounted for	1,444,981.25

Medical equipments and supplies were transferred and sold during the year from Medical Department stores to other branches of the Government, to the Organized Militia, to States, etc., as indicated in the table given below, in the total value of $135,190.81. Of this, $121,090.97 had reached the Treasury on or before June 30, 1915, for credit to the replacing fund established by the act of June 12, 1906 (34 Stats., 256), and the balance $14,099.84 was on that date awaiting settlement. Sales to civilian employees which had not up to June 30 become matter of record in this office are estimated at about $1,500 additional.

A. Supplies issued to States for the use of the Organized Militia, under section 1661, Revised Statutes, and appropriations supplementary thereto:

Alabama	$73.10
Arizona	172.38
Arkansas	143.82
California	1,771.91
Colorado	1,638.95
Connecticut	990.05
Delaware	73.90
District of Columbia	264.28
Florida	189.96

A. Supplies issued to States for the use of the Organized Militia, etc.—Continued.		
Georgia	$581.08	
Hawaii	670.27	
Idaho	140.12	
Illinois	418.90	
Indiana	536.76	
Iowa	1,521.09	
Kansas	109.25	
Kentucky	160.36	
Louisiana	216.16	
Maine	173.54	
Maryland	3,987.57	
Massachusetts	1,996.95	
Michigan	500.42	
Minnesota	589.37	
Mississippi	1,643.42	
Missouri	834.42	
Montana	5.76	
Nebraska	615.22	
New Hampshire	301.74	
New Mexico	279.00	
New York	11,458.56	
North Carolina	448.67	
North Dakota	239.33	
Ohio	6,113.65	
Oklahoma	809.37	
Oregon	25.00	
Pennsylvania	6,466.92	
Rhode Island	317.05	
South Carolina	88.40	
South Dakota	210.12	
Tennessee	932.12	
Texas	3,393.74	
Utah	240.00	
Vermont	268.29	
Virginia	600.50	
Washington	339.74	
West Virginia	25.00	
Wisconsin	759.79	
		$53,336.00
B. Supplies sold to States under section 17, act of Jan. 21, 1903 (32 Stats., 778):		
Alabama	1.99	
Idaho	15.08	
Illinois	272.56	
Maine	38.95	
Maryland	150.78	
Massachusetts	27.81	
New York	232.88	
Ohio	103.34	
Pennsylvania	1,023.21	
Rhode Island	1.99	
Texas	5.50	
Virginia	520.14	
		2,394.23
C. Supplies transferred to other bureaus and departments of the Government:		
Army Medical Museum	66.17	
Quartermaster Corps, U. S. Army	5,027.41	
Engineer Department, U. S. Army	24.86	
Panama Canal	7,189.76	
Alaska Road Commission	17.73	
Navy and Marine Corps	6,556.34	
State Department (relief of American refugees from Mexico)	22.00	
Reclamation Service	64.80	
Bureau of Mines	5.60	

C. Supplies transferred to other bureaus and departments of the Government—Continued.		
Yosemite Park	$25.13	
Forest Service	500.00	
Interstate Commerce Commission	33.75	
Columbia Institution for the Deaf	29.10	
		$19,562.65
D. Sales to the civil government of the Philippine Islands		642.49
E. Sales to the United States Soldiers' Home		23,447.50
F. Sales to the American National Red Cross		30,174.45
G. Sales to colleges under the act July 17, 1914		98.34
H. Sales to civilian employees of the Army and civilians		5,535.15
		135,190.81

VITAL STATISTICS.

The following tables show in detail most of the statistical data upon which the statements in this report are based:

66. Surgical operations performed on American troops.

67. Numerical view of the effect of disease and injury on United States troops serving at home and abroad in the year 1914 as compared with the corresponding data for the year 1913, by races.

68. Admissions to sick report, discharges, and deaths in the Army, with ratios per 1,000 of mean strength, in which all available data for the period 1903–1912 is placed in comparison with the year 1914.

68½. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength for the Army, separately for officers, total enlisted (including American, Porto Rican, and Philippine troops), and grand total, year 1914.

69. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the Army, officers, total enlisted American troops, and grand total, year 1914.

70. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, year 1914, for American troops, total enlisted of the Army, and separately for white and colored.

70½. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the year 1914, United States, continental (excluding Alaska), and separately for officers, total enlisted men, and grand total.

71. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the year 1914, United States, continental (excluding Alaska), and separately for white and colored troops serving therein (enlisted men).

71½. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for officers, total enlisted men, including scouts, and grand total, serving in the Philippine Islands, for the year 1914.

72. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for the year 1914, enlisted American troops serving in the Philippine Islands, separately for white, colored, and total.

73. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for total American troops serving in Alaska, Panama, Canal Zone, and Vera Cruz, Mexico, for the year 1914.

74. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength for American troops serving in Hawaii, 1914, separately for officers, enlisted men, white, colored, and total.

75. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength for American troops serving in China, for Porto Rican native troops, and for Philippine Scouts, year 1914.

75½. Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength for American troops on Army transports, year 1914.

76. Admissions to sick report, discharges, deaths, and noneffectiveness, expressed in ratios per 1,000 of mean strength, for American troops (enlisted men) on duty at home stations, placed in comparison with the same data for those serving at distant stations, year 1914.

77. (Foreign table not used this year.)

78. (Foreign table not used this year.)

79. Showing the most important diseases, by departments, in the United States, officers and enlisted men, 1914.

80. Comparative figures, Army, 1910–1914. American troops, enlisted men.

81. Admissions and cases compared, 1904–1911, inclusive.

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1914.*

Operation.	Disease or injury.	Cases.	Result.			Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Other general anesthetic.	Local.	None.
	EYE.											
Enucleation	Angiosarcoma retrobulbar	1	1				1					
	Laceration of eyeball	1	1				1					
	Foreign body in eyeball	1	1					1				
	Panophthalmitis	1	1					1				
Smith's operation	Cataract	1	1								1	
Iridectomy	Synechia anterior	1	1								1	
Excision of scar tissue	Ankyloblepharon	1	1					1				
Do 1												
Dissection and excision of adherent conjunctiva 1	Symblepharon	2	1	1							2	
Plastic repair	Ectropion lower lid	1	1								1	
Advancement external rectus.	Strabismus	3	3								3	
Rapid dilatation	Stricture nasal duct	1	1					1				
Infiltration subconjunctival.	Keratitis interstitial	1	1					1				
Curetment	Corneal ulcer	1	1								1	
Iridectomy, optical	Corneal opacities	1	1					1				
Expression	Trachoma	2	2					1			1	
Transplantation 5												
Excision and suture 19												
Double ligature 1												
Electro-cautery 1	Pterygium	43	43					9			34	
McReynold's operation 15												
Fuch's operation 2												
Removal by dissection 1												
Incision	Chalazion	14	14								14	
Excision and curetment. 10												
Incision and drainage	Meibomian cyst	5	5								5	
Do 3												
Incision and curetment. 15	Abscess of lid	18	18								15	3
Excision of sac	Sebaceous cyst of lid	2	2								2	
Excision	Foreign body in conjunctiva	1	1								1	
Extraction	Foreign body in cornea	15	15								15	
	EAR.											
Mastoidotomy 16	Mastoiditis	18	18				1	16			1	
Radical operation 2												
Trephining	Mastoid abscess	1	1					1				
Incision of tympanum 4	Otitis media	50	50				2	2		1	40	5
Paracentesis 46												
Incision and curetment	Otitis externa, acute	2	2								2	
Curetment 1	Necrosis, external auditory canal.		2								2	
Curetment and removal of sequestrum 1												
Excision of cyst wall	Suppurating sebaceous cyst, external auditory canal.	1	1								1	
Incision and curetment	Abscess, external auditory canal.	3	3								3	
Incision and drainage	Furunculosis, external auditory canal.	10	10					10				
	NOSE.											
Curetment of outlet 1												
Trephining, curetment, and drainage 2												
Amputation anterior end middle turbinate 7	Frontal sinusitis	13	13					2			11	
Drainage established through nares 1												
Killian's operation 2												

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1914*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Other general anesthetic.	Local.	None.
	NOSE—continued.											
Puncture exploratory .. 1 Turbinectomy by snaring..... 1 Opening of antrum through tooth socket.. 1 Opening of antrum and curetment..... 1	Maxillary sinusitis.....	4	4								2	2
Caldwell-Luc radical operation.	Empyema, maxillary sinus..	1	1					1				
Excision anterior wall sphenoidal sinus.	Sphenoidal sinusitis.....	1	1								1	
Curetment anterior ethmoidal cells..... 5 Extirpation anterior ethmoidal cells..... 2 Turbinectomy..... 3	Ethmoiditis.....	10	10								10	
Turbinectomy, middle, partial.....	Eustachian salpingitis obstructive.	5	5								5	
	Nasopharyngeal catarrh....	40	40								40	
Turbinectomy, middle, complete.	Polypus with purulent sinusitis.	6	6								6	
Excision..... 8 Removal with snare..... 15 Removal of obstructive parts..... 1	Polypus.....	23	23								23	
Submucous resection.... 52 Do..... 61 Fracturing and resetting 1 Resection..... 1 Do..... 2	Deflection of septum.....	53	53					2			50	1
Turbinectomy..... 18 Electric cauterization ... 17 Do.....	Deviation of septum.....	63	63								63	
Do..... 3 Linear cauterization..... 1 Resection of turbinate... 2 Curetment..... 11 Curetment with dilatation of nares..... 1 Adenectomy..... 23	Hypertrophy of turbinate...	37	37								37	
	Adhesions inferior turbinate to nasal septum.	1	1								1	
	Rhinitis hypertrophic.....	6	6								6	
	Adenoids.....	35	35				16	12			7	
Resection..... 4 Excision..... 1 Do..... 2	Nasal spur.....	5	5								5	
Excision with saw..... 15 Submucous resection.... 4 Excision, wide, with electric knife.	Septal spur.....	21	21								21	
	Adeno-carcinoma of nose....	1	1								1	
	MOUTH AND PHARYNX.											
Excision.....	Papilloma of lip.....	3	3								3	
Division of frenum.....	Tongue-tie, partial.....	1	1									1
Excision of sac.....	Ranula.....	1	1					1				
Incision and drainage.....	Abscess of tongue.....	2	2								1	1
	Abscess, maxillary.....	1	1							1		
	Adenitis, salivary gland.....	1	1								1	
Enucleation..... 30 Tonsillectomy.....109 Do.....183 Tonsillotomy..... 4 Excision.....	Tonsillitis.....	139	139					64			70	5
	Hypertrophy of tonsil.....	187	187					41	2		135	9
	Hypertrophy of lingual tonsil.	3	3									3
Tonsillectomy.....	Vincent's angina.....	1	1					1				
	Ludwig's angina.....	1	1								1	
Incision and drainage.....	Abscess of tonsil.....	40	40				1				13	26
	Abscess, peritonsillar.....	68	68					4			28	36

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1914*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Other anesthetic.	Local.	None.
	MOUTH AND PHARYNX—con.											
Amputation	Elongated uvula	11	11								7	4
Curetment 1 Adenectomy 15	Adenoids, pharyngeal	16	16					15				1
Tracheotomy 1 Gastrostomy (Senn) for feeding 1	Angiosarcoma, pharynx	2	2					2				
	NECK AND THORAX.											
Suturing 1 Tracheotomy and suturing 1	Incised wound of neck	2	2					1				1
Repair by suture	Incised wound of throat, penetrating trachea, suicidal.	1	1				1					
Incision and drainage 1 Tracheotomy 1	Abscess, peritrachial	2	2								1	1
Ligation of artery 1 Extirpation right lobe 2	Goiter	3	2	1			1	1			1	
Ligation superior thyroid arteries.	Exophthalmic goiter	1	1					1				
Excision of scar, separation of adhesions, and suture of platysma.	Adhesions following thyroid operation.	1		1				1				
Enucleation	Tumor, benign, thyroid gland.	1	1					1				
Electrocautery	Laryngeal ulcer	1	1								1	
	Laryngitis, tuberculous	4	4								4	
Thoracotomy and drainage 1	Pleurisy	9	8			1		1				8
Paracentesis 8												
Thoracotomy 2												
Resection of rib and drainage 3	Empyema	5	5					3			2	
Do 2												
Incision and drainage 1	Abscess of lung	3	2			1		2			1	
Thoracotomy and drainage	Hemothorax	1	1					1				
Aspiration	Pleurisy, tuberculous	1	1								1	
Pneumolysis, Wilms's operation, resection of ribs.	Chronic pulmonary tuberculosis.	5	5					5				
Curetment and cauterization	Sinus, opening 8 rib	1		1				1				
Gastrostomy, Witzel 1 Gastrostomy, Hartman 1	Stricture of esophagus (1 impermeable).	2	1		1			2				
	ABDOMEN.											
Gastrojejunostomy, Mayo 1 Gastroenterostomy 2 Laparotomy 1 Laparotomy and repair of perforation 2 Laparotomy and infolding of ulcer with Lambert's suture 1	Ulcer of stomach	7	6		1			5	2			
Laperatomy, exploratory 1 Laparotomy and excision 2 Gastrojejunostomy 1 Posterior gastroduodenostomy, no loop, Mayo 1	Ulcer of duodenum	5	4			1		5				
Reopening gastroenterostomy wound, suture and ligation of vessels.	Post-operative hemorrhage following gastroenterostomy.	1				1		1				
Negative exploration of stomach and gall bladder.	Suspected ulcer of stomach	1	1					1				
Incision 1 Laparo-hepatotomy 1 Rib resection and transpleural evacuation 1	Abscess of liver	3	2	1				3				
Cholecystotomy	Cholangitis	1	1					1				

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1914*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Other general anesthetic.	Local.	None.
	ABDOMEN—continued.											
Cholecystotomy..... 1 Cholecystostomy..... 2 Do..... 7	Cholecystitis.....	3	3					3				
Cholecystotomy..... 4	Cholelithiasis.....	11	10			1		11				
Laparotomy exploratory....	Suspected cholelithiasis.....	1	1					1				
Cholecystotomy.....	Gastroptosis, enteroptosis, and chronic cholecystitis.	1	1					1				
Excision of tract.....	Fistula after operation for hepatic abscess.	1	1					1				
Cholecystectomy.....	Biliary fistula after cholecystostomy.	2	2					2				
Laparotomy.....	Abdominal fistula.....	1	1					1				
Laparotomy and drainage...	Peritonitis.....	2	2					2				
	Peritonitis, general septic...	1				1		1				
	Peritonitis, general, following perforated typhoid ulcer.	1				1		1				
Laparotomy, exploratory...	Gastroenteritis.....	1	1					1				
	Septic condition.....	2	1			1		2				
Do..... 1	Intestinal tuberculosis.....	1	1					1				
Laparotomy and freeing of adhesions..... 5	Intestinal adhesions.....	6	6					6				
	Adhesions about gall bladder.	1	1					1				
Do.....	Adhesions of gall bladder and ascending colon.	1	1					1				
Do..... 2 Plastic..... 2 Kink severed, gut freed, and raw area closed over with peritoneum..... 1	Lane kink.....	5	5					5				
Laparotomy, exploratory...	Suspected ileus.....	1				1		1				
Enterostomy..... 1 Laparotomy, resection of adhesions, and omentum..... 2 Laparotomy, cutting of fibrous bands, releasing of gut, and resection 3 inches ileum..... 1	Intestinal obstruction, acute.	4	3			1		4				
Laparotomy, exploratory, and colostomy.	Intestinal obstruction due to malignant stricture, junction of sigmoid and rectum.	1			1			1				
	Fibroma mesentery, inoperable.	1				1		1				
Laparotomy, exploratory...	Tumor, undetermined, probably malignant, involving cecum.	1	1					1				
Ileo-colostomy (Moynihan), resection cecum with 10 c. m. colon and 5 c. m. ileum.	Adeno-carcinoma cecum with invagination head of cecum, occluding ileo-cecal valve.	1	1					1				
Laparotomy, exploratory...	Adhesions of cecum, suspected cecal ulcer.	1	1					1				
Laparotomy and drainage...	Abscess, subphrenic.....	1	1					1				
Do..... 1	Abscess of pancreas, acute...	1				1		1				
Lumbar incision, evacuation and drainage..... 1	Abscess, retrocecal.....	2	1			1		2				
Do.....	Abscess, retroperitoneal.....	1	1					1				
Laparotomy, negative exploration.	Suspected retrocecal abscess.	1	1					1				

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1914*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Other general anesthetic.	Local.	None.
	ABDOMEN—continued											
Laparotomy..... 2 Enterorrhaphy..... 1 Abdominal section and drainage..... 1 Laparotomy and packing of hepatic wound..... 1	Gunshot wound of abdomen.	5	1	1	2	1	...	5	...	...	.....	...
Suturing of colon.....	Incised wound involving transverse colon.	2	2	...	...	...	2	.....	...	...	.....	...
Laparotomy.....	Stab wound, abdomen.....	2	1	...	1	...	...	2	...	...	.....	...
Laparotomy, exploratory...	Bleeding from intestines.....	1	1	...	...	...	...	1	...	...	.....	...
Appendectomy..... 502 Incision and drainage of appendiceal abscess.. 7 Removal of gangrenous appendix, flushing of abdominal cavity and drainage..... 1	Appendicitis (12 cases were reported as gangrenous, 8 with perforation).	510	507	...	1	2	9	485	16	...	.....	...
Incision and drainage.....	Abscess following appendectomy.	2	2	...	...	...	...	2	...	...	.....	...
Excision of tract.....	Sinus following appendectomy.	2	2	...	...	...	...	2	...	...	.....	...
Laparotomy and freeing of adhesions.	Adhesions following appendectomy.	6	6	...	...	...	...	6	...	...	.....	...
Excision of scar, and separation of adhesions.	Painful adhesions following an old appendectomy with drainage.	1	1	...	...	...	...	1	...	...	.....	...
Bassini's operation..... 211 Bassini's modified operation..... 30 Ferguson's operation... 24 Ferguson's modified operation..... 3 Andrew's operation.... 10 Halstead's operation... 5 Kocher's operation..... 1 Operation not stated... 2	Inguinal hernia.....	286	285	...	...	[1] 1	6	272	3	...	5	...
Bassini's operation.....	Relaxed inguinal ring.....	2	2	...	...	...	...	.....	...	...	2	...
Mayo's operation..... 12 Mayo's modified operation..... 1 Ferguson's operation.... 2 Flap operation..... 3 Excision of scar, closure of peritoneum..... 2 Excision of sac, and overlapping of fascia..... 1 Abdominal section freeing of adhesions and repair..... 1 Ligation and removal of omental fat and repair of abdominal wall..... 1 Operation not stated.... 7	Ventral hernia (8 cases were reported as postoperative).	30	30	...	...	...	1	28	...	...	1	...
Excision of sac and omentum	Femoral hernia.....	5	5	...	...	...	...	4	...	...	1	...
Herniotomy.....	Hernia, kind not stated.....	4	4	...	...	...	...	4	...	...	.....	...
Incision, curetment, and exposure.	Sinus following operation for hernia.	1	1	...	...	...	...	1	...	...	.....	...
	ANUS AND RECTUM.											
Incision, curetment, and drainage..... 14 Incision and drainage... 26 Incision and packing.... 1 Incision and cauterization..... 2	Ischiorectal abscess.....	43	43	...	...	...	9	8	...	...	18	8

[1] Died of septicemia 6 days after operation.

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1914*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Other general anesthetic.	Local.	None.
	ANUS AND RECTUM—contd.											
Incision and drainage	Perirectal abscess	4	4				1	3				
Incision, curetment, and drainage.	Abscess, fistulous	1	1					1				
Excision of scar tissue	Sinus following ischiorectal abscess.	1	1					1				
Excision, clamp and cautery.	Polypi, rectal wall	1	1				1					
Whitehead's operation	Prolapse of rectum	1	1					1				
Incision and curetment	Ulcer of rectum	2	3	3			1	2				
Application actual cautery		1										
Removal of portion for microscopical examination.	Suspected carcinoma of rectum.	1	1					1				
Excision	Fistula in ano	16	42	41	1		6	34			2	
Excision and packing		7										
Excision and curetment		13										
Excision, curetment, and packing		3										
Excision and suture		1										
Partial division of sphincter with cautery		2										
Dilatation of sphincter	Fissure of anus	3	3				1				2	
Whitehead's operation	Prolapsus ani	1	1					1				
Freshening edges of external sphincter and suture.	Incontinence of feces from loss of sphincter control.	1		1				1				
Allingham's operation		35										
Cauterization		3										
Clamp and cautery		33										
Clamp, cautery, and suture		27										
Clamp and ligation		6										
Dissection, ligation, and excision		1										
Excision		77										
Excision and ligation		27										
Excision and cautery		6										
Excision and suture		19										
Excision, clamp and cautery		21										
Excision, clamp, cautery, and ligation		1										
Incision	Hemorrhoids	4	369	369			22	237	4	1	101	
Incision and packing		2										
Incision and ligation		3										
Incision and suture		1										
Incision and curetment		3										
Incision and evacuation of clot		24										
Ligation		6										
Ligation and incision		1										
Ligation and excision		52										
Modified ligature		1										
Pilcher's operation		4										
Resection and suture		2										
Thewell-Thomas' operation		1										
Whitehead's operation		7										
Whitehead's modified operation		2										
Excision	Papillomata circumanal	2	2						2			

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1914*—Continued.

Operation.	Disease or injury.	Cases.	Result.			Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Other general anesthetic.	Local.	None.
	GENITO-URINARY SYSTEM.											
Orchidectomy	Gumma of testicle	1	1						1			
	Orchitis	2	2				1	1				
	Epididymo-orchitis	1	1								1	
	Atrophy of testicle	1	1					1				
	Tuberculous testes	1	1					1				
Incision of tunica vaginalis	Undescended testicle	2	2					1			1	
	Orchitis (one case due to mumps).	3	3					1			2	
Vasotomy	Vesiculitis	1	1								1	
Incision of tunic 10 Epididymotomy 59 Epididymectomy 5 Hagners' operation 3 Epididymectomy 1 Excision of mass for pathological examination 1 Low excision of veins 3 High excision of veins 146 Radical cure 3 Resection 2 Bennett's operation 1 Partial excision pampiniform plexus 2 Excision (site not stated) 10 Ligation (site not stated) 20 Excision of sac 14 Eversion of sac 2 Aspiration 2 Aspiration and injection of phenol 2 Tapping 2 Incision and drainage 1 Andrews's bottle operation 17 Brule's operation 1 Doyen's modified operation 1 Winckelman's operation 1	Epididymitis	77	77				23	43		4	7	
	Epididymitis tuberculous	2	2								2	
	Varicocele	187	187				14	120	1		52	
	Hydrocele	43	43				2	29	2		10	
Incision and evacuation of cyst, dissection of tunic from testis, eversion and replacement in scrotum.	Hydrocele with adhesions of tunica vaginalis, congenital.	1	1					1				
Excision of cysts	Multiple cysts testes	1	1					1				
	Cyst spermatic cord	1	1					1				
Excision	Tumor, tunic vaginalis	1	1								1	
	Tumor globus major	1	1								1	
Hagners' operation	Abscess of epididymis, venereal.	1	1					1				
Excision of sinus and portion of epididymis.	Sinus of scrotum	1	1					1				
Excision	Tumor of scrotum, benign	2	2					1			1	
Resection of scrotum	Elongated scrotum	13	13					10			3	
Nephrotomy	Pyelitis	2	2					2				
	Pyonephrosis	1				1	1					
Nephrolithotomy	Nephrolithiasis	3	2		1			3				
Incision, old sinus and drainage 1 Lumbar incision, evacuation and drainage 2	Perinephritic abscess	3	3					2				1
Laparotomy exploratory	Tumor of kidney	1	1					1				
Partial excision and packing	Tumor of kidney, type undetermined.	1				1		1				
Lithotomy supra-pubic	Calculus of urinary bladder	2	2					2				
Incision and drainage	Abscess of prostate	1	1							1		

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1914*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Other general anesthetic.	Local.	None.
	GENITO-URINARY SYSTEM—continued.											
Perineal section	Perineo-urethral fistula	1	1					1				
Urethrotomy, external	Fistula of penile urethra	1	1					1				
Incision and packing 1 Incision and drainage 8 Do	Perineal abscess	9	9					1			5	3
	Periurethral abscess	14	14				1	4			6	3
Perineal section	Rupture of urethra	1	1					1				
Divulsion 3 Urethrotomy 2	Stricture of urethra	5	5					4			1	
Meatotomy	Stricture of meatus	1	1								1	
Plastic operation	Hypospadias	1		1				1				
Splitting of prepuce 18 Circumcision 178	Phimosis	196	196					33		3	158	2
	Paraphimosis	3	3								3	
Do	Elongated, and redundant prepuce.	179	179				1	23			155	
	Venereal sore	20	20					17			3	
	Balanoposthitis	5	5								5	
	Adhesions of foreskin	4	4				1				3	
	Warts	1	1					1				
Plastic operation	Adherent skin after circumcision.	1	1					1				
Excision 2 Cauterization 1	Verruca progenitalis	3	2	1				2				1
	VASCULAR SYSTEM.											
Ligation meningeal artery	Disease or injury not stated.	1	1					1				
Ligation	Divided artery, hand	1	1									1
Ligation of vessels	Secondary hemorrhage following operation for gumma of testicle.	1	1				1					
Ligation superficial femoral artery.	Gunshot wound with severe hemorrhage.	1	1						1			
Excision of vein	Phlebitis	2	2				1	1				1
Do 25 Excision and ligation 1 Ligation and excision 15 Multiple ligation 1 Mayo's operation 3 Schede's modified operation 10 Trendelenberg's operation 1 Excision	Varicose veins	56	56				3	24			29	
	Obliterated median basilic vein and surrounding slough, following injection of salvarsan.	1	1					1				
	NERVOUS SYSTEM.											
Subtemporal decompression (Cushing).	Tumor of cerebellum	1	1					1				
	Intracranial pressure, cause undetermined.	1	1					1				
Trephining and drainage	Epilepsy, Jacksonian	1	1					1				
Exploration temporo-sphenoidal lobe.	Abscess of brain	1				1		1				
Union of severed nerve	Facial paralysis following partial excision of parotid gland.	1	1				1					
Neurectomy, inferior dental branch, fifth nerve.	Neuralgia, trifacial, third division, fifth nerve.	1	1					1				
Dissection of musculo-spiral nerve from callus.	Wrist drop, due to fracture of humerus.	1	1					1				
Excision	Neuro-fibroma, median nerve.	1	1								1	

ABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1914*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Other general anesthetic.	Local.	None.
	NERVOUS SYSTEM—contd.											
cision and breaking up of adhesions.	Excessive callous formation constricting radial nerve.	1	1	...	...	...	...	1	...	...	...	...
emoval of callus, and excision of scar tissue.	Paralysis extensor muscles hand and forearm, sequel to gunshot wound.	1	1	...	...	...	...	1	...	...	...	...
esection of scar tissue, transplantation flexor communis digitorum to flexor sublimis digitorum.	Partial paralysis extensor s hand.	1	1	...	...	...	...	1	...	...	...	...
emoval terminal sections..	Neuromata digital nerves, third and fifth fingers.	1	1	...	...	...	...	1	...	...	...	...
Vet stretching of nerve.....	Neuritis sciatic, complicated by scoliosis.	1	1	...	...	...	...	1	...	...	...	...
	SKIN AND CELLULAR TISSUE.											
ncision and drainage...323												
ncision and cautery.... 1	Abscess.....	330	330	...	...	...	3	20	2	...	149	156
ncision and curetment.. 6												
Do..... 1												
xcision and drainage... 2	Carbuncle.....	23	23	...	...	...	2	2	...	...	15	4
xcision and curetment. 1												
ncision and drainage... 19												
Do.....110												
ultiple incision and drainage..... 9	Cellulitis.....	119	118	...	...	1	6	13	2	...	53	45
uretment.....	Ulcer (one following X-ray burn).	2	2	...	...	...	...	2	...	...	...	...
	Exuberant granulations.....	1	1	...	...	...	...	.....	...	...	.....	1
Do..... 1												
xcision..... 2												
xcision of tract with suture..... 1	Sinus.....	7	6	1	...	...	...	4	1	...	2	...
uretment of tract with suture..... 1												
ncision and drainage... 2												
	Painful scar.....	2	2	...	...	...	...	1	...	...	1	...
xcision.....	Keloid.....	1	1	...	...	...	...	.....	...	...	1	...
	Tattoo marks.....	1	1	...	...	...	...	.....	...	...	1	...
eparation by incision.....	Syndactylism, fingers.....	1	1	...	...	...	...	.....	...	...	1	...
emoval of nail.....	Deformed toenail.....	3	3	...	...	...	...	.....	...	...	2	1
Do..... 1	Onychia.....	6	6	...	...	...	...	.....	...	...	6	...
ncision and drainage... 5												
xcision..... 66												
artial excision.....108												
artial excision and curetment..... 5												
xcision of matrix..... 2												
xcision, redundant tissue..... 7	Ingrowing toenail.....	223	223	...	...	...	3	21	...	16	175	8
vulsion of nail..... 21												
nger's operation..... 5												
otting's operation..... 7												
ellar's operation..... 2												

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on office and enlisted men of the Army during the calendar year 1914*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Other general anesthetic.	Local.	
	LYMPHATIC SYSTEM.											
Incision and drainage... 2 Adenectomy..... 10	Adenitis tuberculous.....	12	12	...	...	...	...	12	...	...	.....	
Adenectomy.....267 Incision and curetment..656 Incision and drainage... 29	Adenitis inguinal venereal.....715 Adenitis inguinal non-venereal.....146 Adenitis nonvenereal, site not stated..... 53 Adenitis inguinal, nature not stated..... 11 Adenitis, site and nature not stated..... 11 Adenitis, nonvenereal, various locations..... 15 Adenitis venereal, site not stated..... 1	952	952	...	...	...	44	263	7	4	468	1
Incision curetment and drainage.	Suppurating wound following operation for chronic inguinal adenitis.	1	1	...	...	...	...	.....	...	...	1	
Excision of submental lymph nodes..... 1 Incision and drainage... 1	Lymphangitis.....	2	2	...	...	...	...	2	...	...	.....	
	MUSCLES, TENDONS, FASCIÆ, LIGAMENTS, AND BURSÆ.											
Suturing of triceps muscle...	Laceration of arm.....	1	1	...	...	...	...	.....	1	...	.....	
Closure of fascia.....	Hernia of muscle.....	1	1	...	...	...	...	1	...	...	.....	
Lengthening and splicing 1 Tenorrhaphy..... 7	Severed tendons.....	8	8	...	...	...	...	5	...	...	1	
Incision and drainage.....	Thecitis flexor tendon.....	1	1	...	...	...	...	1	...	...	.....	
Loosening of adhesions.....	Adhesions sheath flexor tendon.	1	1	...	...	...	...	1	...	...	.....	
Multiple fasciotomy.....	Contracture plantar fascia...	1	1	...	...	...	...	1	...	...	.....	
Excision of sac.....	Bursa, adventitious.....	1	1	...	...	...	...	1	...	...	.....	
Do..... 7 Incision and curetment.. 2 Incision and drainage... 4 Aspiration..... 1	Bursitis.....	14	14	...	...	...	...	6	...	...	6	
Excision of ossified area.....	Bunion.....	1	1	...	...	...	1	.....	...	...	.....	
Excision and suture.....	Ganglion.....	14	14	...	...	...	...	5	...	...	9	
	BONES.											
Trephining for decompression.	Fracture skull, at base.....	2	1	1	...	...	...	2	...	...	.....	
	Fracture skull, vault.....	2	2	...	...	...	...	2	...	...	.....	
	Fracture skull, depressed....	2	.....	...	...	2	...	.....	...	...	.....	
Removal of fragments and drainage..... 1 Excision and removal of fragments..... 1 Excision and elevation of fragments..... 1 Trephining..... 1 Craniotomy, removal of fragments..... 1	Fracture, compound, depressed frontal bone.	3	2	...	1	...	1	1	...	...	.....	
	Fracture, stellate, simple, temporal, and parietal bones.	2	1	...	...	1	...	1	...	...	.....	
Removal of depressed fragments.	Fracture comminuted temporal bone.	1	1	...	...	...	...	1	...	...	.....	
Elevation of fragments and removal of blood clots.	Fracture skull, compound comminuted.	1	1	...	...	...	...	1	...	...	.....	
Incision, exploratory.....	Suspected fracture of skull..	1	1	...	...	...	...	1	...	...	.....	
Incision and elevation of fragments.	Fracture depressed zygoma in process.	1	1	...	...	...	...	.....	...	...	1	
Laminectomy.....	Fracture second cervical vertebra.	1	.....	...	...	1	...	1	...	...	.....	

TABLE NO. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1914*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Other general anesthetic.	Local.	None.
	BONES—continued.											
Wiring of fragments	Fracture of lower jaw	3	3				1	1				
Do 2												
Incision, freshening of fragments, and securing with kangaroo tendon 1	Fracture of clavicle	3	3				1	2				
Partial subperiosteal excision of greater tuberosity of humerus.	Fracture and dislocation upward of greater tuberosity, humerus.	1	1					1				
Excision interposing tissue, freshening ends of bone, reduction and plating.	Malunion following fracture surgical neck humerus.	1	1					1				
Incision, exploratory	Fracture greater tuberosity humerus.	1	1					1				
Removal loose fragments	Fracture compound comminuted humerus, involving elbow joint	1	1					1				
Nailing of condyle in place	Fracture simple, tip of external condyle humerus.	1	1					1				
Removal of callus, and application of Lane plate.	Fracture of humerus, site not stated.	2	1		1			2				
Breaking up of adhesions	Fracture simple, intraligamentous upper end radius.	1	1				1					
Open operation and reduction.	Fracture simple, radius	1	1					1				
Refracture, open operation and reduction.	Colles's fracture, old	1	1					1				
Wiring of fragments	Fracture of olecranon	1	1					1				
Osteotomy and wiring	Malunion, ulna and radius, middle third.	1	1					1				
Resection ends of bones, wiring of radius and plating of ulna.	Vicious union, ulna and radius.	1	1					1				
Coccygectomy	Coccygodynia	1	1					1				
Resection ends of bone and wiring 1	Fracture of femur, fibrous union.	2	2					2				
Application of Lane plate and cast 1												
Do	Fracture of femur, site not stated.	1	1					1				
Incision, evacuation of pus, and removal of plate and screws.	Loose screws from plate on femur causing suppuration.	1	1					1				
Excision of fibrous tissue, freshening and wiring ends of bones.	Malunion following comminuted fracture tibia, and simple fracture of fibula.	1	1					1				
	Fibrous union tibia, following fracture simple, both bones leg.	1	1					1				
Incision exploratory for malunion and application of Lane plate.	Fracture compound, tibia and fibula.	1	1					1				
Application of Lane plate	Fracture simple, tibia and fibula.	1	1					1				
Resection and wiring	Ununited fracture, tibia and fibula.	1	1					1				
Resection 1	Fracture compound comminuted tibia and fibula.	2	1		1			2				
Incision and drainage, and fixation by wire 1												
Application of Lane plate	Fracture of tibia	2	2					2				
Do 1												
Bridging of fracture with tibial fragment 1	Old ununited fracture, tibia.	3	2		1			3				
Insertion of bone plug into medullary canal and cast 1												

TABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1914*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Other general anesthetic.	Local.	None.
	BONES—continued.											
Friction ends of bone	Fracture, comminuted, of tibia.	1	1					1				
Open reduction and wiring	Fracture, compound, of tibia.	2	2					2				
Application of Lane plate	Old fracture fibula, with vicious union.	1	1					1				
Resection of fragments, wiring with silver and cast.	Old fracture fibula, with overlapping fragments.	1	1					1				
Excision of small fragments	Fracture of patella	1	6	6				6				
Suturing		1										
Murphy's operation		1										
Suturing of bone and capsule		1										
Operation not stated		1										
Incision, removal of blood clots, approximation of fragments with tendon		1										
Exposing of fragments, and approximation by suturing of ligament and fascia.	Refracture simple, of patella.	1	1					1				
Wiring of fragments	Fracture (bone not stated)	8	8					8				
Application of plates or nails	Ununited fracture long bone (bone not stated).	8	8				1	7				
Excision of fragments	Fracture, metacarpal	1	2	2				2				
Incision, and removal distal third		1										
Open reduction		1										
Freshening of fragments and reposition	Fracture, old, metacarpal, with angular deformity.	1	2	2				2				
Ligation of superficial arch, removal of bone fragments, and suturing.	Gunshot wound of hand	1	1				1					
Removal remaining portion of metacarpal.	Gunshot wound carrying away finger and distal end metacarpal.	1	1				1					
Removal bone fragments and suturing.	Gunshot fracture terminal phalanx finger.	1	1				1					
Trimming of bone and suturing	Laceration of finger	1	2	2				1			1	
Removal of fragments		1										
Resection phalanx and splinting.	Deformed proximal phalanx finger.	1			1		1					
Open reduction and reposition fragments.	Fracture, simple comminuted malleolus.	1	1					1				
Removal of spicula	Fracture, great toe	1	1					1				
Excision	Hypertrophied sesamoids great toe.	1	1					1				
	Exostosis	11	10	1				9			2	
Removal of dead bone	Necrosis, skull after trephining.	1	1				1					
Sequestrotomy and curetment.	Necrosis, superior maxilla	1	1				1					
Incision and drainage	Necrosis, inferior maxilla	1	3	3				2			1	
Removal of sequestrum		1										
Excision dead bone and drainage		1										
Removal of plate and drainage.	Infection and slight necrosis following application of Lane plate to fracture neck of humerus.	1	1					1				
Incision and curetment	Necrosis, partial, tenth rib	1	1								1	
Removal of dead bone	Necrosis, femur	1	2	2			1	1				
Removal of sequestrum		1										
Incision and curetment	Necrosis, tibia	1	1									1

ABLE No. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1914*—Continued.

Opration.	Disease or injury.	Cases.	Result.			Anesthetic.				
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Other general anesthetic.	Local.	None.
	BONES—continued.											
cision curetment and drainage.	Necrosis, radius and ulna	3	1	2			1	2				
emoval of sequestrum and curetment of sinus.	Necrosis, ulna	2	2				2					
xcision and drainage	Necrosis, metacarpal	1	1					1				
ıretment and drainage	Necrosis, phalanx finger	1	1					1				
esection	Necrosis, metatarsal bones	2	2					2				
xposure and curetment 1 cision curetment and drainage 2 Do 2	Necrosis, bone not stated	3	3					1			2	
cision and drainage 11 cision and curetment 3 emoval of section for examination 1 emoval of linear strip 1 xcision 2 ıretment and drainage. 1	Periostitis	17	17				2	5			6	4
cision curetment and packing.	Osteomyelitis	4	4					4				
ounter incision 1 cision and drainage 1 emoval of wire, and curetment.	Osteoperiostitis, chronic	1	1					1				
	Osteitis	2	2					1			1	
	Sinuses persistent at site of fracture	1	1					1				
	JOINTS.											
esection	Limitation function of temporo-maxillary joint	1	1					1				
apsulorrhaphy posterior axillary route.	Dislocation, habitual, shoulder joint	1	1					1				
rthrotomy and reduction	Dislocation subcoracoid, complicating fracture, surgical, neck of humerus	1		1				1				
ncision, evacuation, and curetment, end of humerus.	Arthritis, suppurative, elbow joint, following measles	1	1					1				
ncision and drainage	Synovitis, chronic purulent, elbow	1	1								1	
Murphy's operation	Limitation function elbow joint	1	1					1				
ncision and nailing lower end of ulna to lower end of radius.	Old dislocation, lower end ulna	1	1					1				
xcision of scaphoid	Dislocation, carpal scaphoid	1	1					1				
uretment sterno-clavicular articulation.	Unhealed operation wound	1	1					1				
eplacement	Subluxation fifth lumbar vertebra	1	1					1				
xcision	Dislocation semilunar cartilage	6	6					6				
xcision and removal	Fracture semilunar cartilage	1	1					1				
ncision and removal	Floating cartilage, knee joint	5	5					3			2	
Mayo's operation	Detached semilunar cartilage	2	2					2				
emoval of bullet	Gunshot wound, knee joint, bullet lodged within capsular ligament	1	1								1	
ncision, removal of bullet and drainage.	Gunshot wound, knee, infected	1	1					1				
ncision and drainage	Infected wound of knee	2	2					1			1	
eduction and suture	Compound dislocation proximal phalangeal joint finger	1	1					1				

TABLE NO. 66.—*Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1914*—Continued.

Operation.	Disease or injury.	Cases.	Result.				Anesthetic.					
			Successful.	Partially successful.	Failure.	Died.	Chloroform.	Ether.	Chloroform and ether.	Other general anesthetic.	Local.	None.
	JOINTS—continued.											
Resection	Ankylosis knuckle	1	1					1				
Arthroplasty	Ankylosis finger	1	1					1				
	Old fracture	1	1					1				
Excision 1 Arthrotomy 1 Incision and drainage 2 Aspiration 2 Excision of exostosis 1 Weir's operation 1 Mayo's operation 10 Keller's operation 1	Arthritis	6	6				1	4			1	
Resection head, first phalanx	Hallux valgus	13	13					13				
	Hammer toe	1	1					1				
	AMPUTATIONS.											
Amputation: At shoulder	Crushing of arm, railroad accident.	2	2					2				
Forearm, lower third	Necrosis, carpal and metacarpal bones.	1	1					1				
Hand	Gunshot wound, hand	1	1					1				
	Compound comminuted fracture, hand.	1	1					1				
	Necrosis due to compound fracture.	1	1					1				
Thigh, junction upper and middle thirds.	Gangrene of leg	1	1					1				
Thigh, lower third	Gangrene of foot, diabetic	1			1					(1)		
Leg, junction upper and middle thirds.	Fracture, comminuted, leg	1	1					1				
Leg, upper third	Crushing	1	1					1				
Leg, 4 inches below knee	Crushing, railroad accident	1	1					1				
Leg, junction middle and lower thirds.	Crushing foot and leg	1	1					1				
Leg, site not stated	Traumatic amputation	1	1					1				
Leg, lower third Foot	Gunshot wound	2 1	2 1					2 1				
Amputation through third and disarticulation fourth and fifth metacarpals.	Crushing of hand	1	1					1				
Amputation of finger	Gunshot wound	16	16				1	11	1		2	1
	Contusion and laceration	12	11		1			6			5	1
	Fracture	6	6				1	3			2	
	Crushing	4	4					2			2	
	Other injury	7	7					7				
	Disease of bone	9	9				2	5			1	1
	Ankylosis	4	4				1	2			1	
	Supernumerary finger	1	1					1				
	Other disease	4	4				1	3				
	Cause not stated	2	2				1	1				
Amputation of toe	Gunshot wound	3	3					2			1	
	Frostbite, first, second, and third toes.	1	1					1				
	Other injury	2	2				1				1	
	Hammer toe	16	16				2	8	1	1	4	
	Overlapping toe	4	4					3			1	
	Necrosis	2	2				2					
	Other disease	5	5					2			3	
	FOREIGN BODIES.											
Extraction	Bullet	7	7					1			5	1
Extraction of shot	Charge of shot	1	1								1	
Incision and removal	Shot lodged in forearm	1	1								1	
Extraction, disinfection, and drainage.	Wad and fragments of bone	1	1					1				
Incision and extraction	Nail in ankle	1	1					1				
	Wire nail	1	1					1				
	Cactus thorn, deep in tissues	2	2					1			1	

[1] Spinal anesthesia.

TABLE No. 66. *Surgical operations performed by officers of the Medical Corps on officers and enlisted men of the Army during the calendar year 1914*—Continued.

Operation.	Disease or injury.	Cases.	Result. Successful.	Partially successful.	Failure.	Died.	Anesthetic. Chloroform.	Ether.	Chloroform and ether.	Other general anesthetic.	Local.	None.
	FOREIGN BODIES—continued.											
ncision and removal	Buried silk sutures	2	2					2				
Extraction	Foreign body in foot	1	1					1				
ncision and extraction	Piece of glass	3	3								2	1
Extraction and suturing	Wood splinter	1	1								1	
ncision and extraction												
	TUMORS.											
Excision of tumor and submental bone	Epithelioma	3	3					2			1	
Excision	Fibrosarcoma	1	1					1				
Do	Endothelioma, carotid body	1	1					1				
Excision for diagnosis	Spindle cell sarcoma	1	1			1						
Excision	Adenoma	1	1					1				
	Angioma	2	2								2	
Do	Cyst	15	15					1			14	
ncision and expression	Cyst, intra-muscular, thigh	1	1			1						
ncision and drainage	Cyst, serous, thigh	1	1								1	
ncision and curetment	Cyst, sebaceous	46	46					8			37	1
Excision												
Excision and suture	Dermoid cyst	3	3			1		1			1	
Electrical removal	Fibroma	3	3					2			1	
	Hematoma	5	5					1			4	
ncision and drainage	Lipoma	16	16					6			10	
Do												
Excision	Papilloma	5	5								5	
	Tumor of clavicle, nature not stated	1	1					1				
Do	Tumor of breast, nature not stated	4	4			1		3				
	Tumor, nature not stated	3	3					2			1	
Excision with electric knife	Tumor, dorsum, hand, type undetermined	1	1								1	
	PLASTIC OPERATIONS.											
Thiersch's operation	Shotgun wound	3	3									3
Skin grafting	Ulcer	1	1								1	
Excision and skin grafting	Wart	1	1								1	
	Cicatrix face, with contraction	1	1					1				
Plastic repair	Web fingers	1	1								1	
	Contracting cicatrix buttocks and perineum	1	1					1				
	Laceration of ear	1	1								1	
	MISCELLANEOUS OPERATIONS.											
Amputation mammary gland	Mastitis	1	1								1	
Excision skin and cellular tissue	Elephantiasis	1		1				1				
Amputation	Caudal appendage, coccygeal	1	1								1	
Coaptation and suturing	Incised wound	18	18			3		1			2	12
Cleansing and closure	Lacerated wound	29	29			2		3			6	18
Suturing and drainage												
Do	Punctured wound	5	5								3	2
Incision and drainage												
Incision and cauterization	Gunshot wound (3 infected)	5	4			1	1	3				1
Suturing and drainage												
Incision and drainage	Infected wound	20	19			1		2			13	5
Do												
Multiple incision and drainage												
Total number of cases		5,604	5,545	17	15	27	231	2,375	52	31	2,343	572

TABLE No. 67.—*Numerical view of the effect of disease and injury on United States troops serving at home and abroad, in the year 1914, compared with the corresponding data for the year 1913, by races.*

ABSOLUTE NUMBERS.

		Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Noneffective from sickness.	
			Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Days treated.	Constantly noneffective.
White troops	1914	81,750	54,592	44,270	10,322	1,066	935	131	363	188	175	1,429	1,123	306	710,545	1,946.70
	1913	76,135	50,737	40,343	10,394	1,021	919	102	370	192	178	1,391	1,111	280	665,985	1,824.62
Colored troops	1914	5,478	3,487	2,786	701	79	69	10	29	20	9	108	89	19	54,338	148.88
	1913	4,631	3,520	2,888	632	61	56	5	27	18	9	88	74	14	51,164	140.18
Porto Rican troops	1914	669	421	367	54	6	6	.....	3	.....	3	9	6	3	5,499	15.07
	1913	591	486	434	52	5	4	1	2	2	.....	7	6	1	5,329	14.60
Philippine Scouts	1914	5,020	3,585	3,101	481	48	44	4	16	11	5	64	55	9	37,189	101.89
	1913	5,096	3,471	2,983	488	48	45	3	48	14	34	96	59	37	34,050	93.29

TABLE No. 67.—*Numerical view of the effect of disease and injury on United States troops serving at home and abroad, in the year 1914, compared with the corresponding data for the year 1913, by races*—Continued.

PROPORTIONATE NUMBERS.

[Ratios per 1,000 of mean strength.]

	Mean strength.	Admitted.			Discharged on certificate of disability.			Died.			Total losses.			Constantly non-effective.	Days treated.	
		Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.	Total.	Disease.	Injury.		Each soldier.	Each case.
White troops.....1914	81,750	667.79	541.53	126.26	12.90	11.31	1.58	4.39	2.27	2.12	17.29	13.58	3.70	23.81	8.69	13.02
1913	76,135	666.41	529.89	136.52	13.25	11.92	1.32	4.80	2.49	2.31	18.05	14.41	3.63	23.97	8.75	13.13
Colored troops.....1914	5,478	636.55	508.58	127.97	14.42	12.60	1.83	5.29	3.65	1.64	19.71	16.25	3.47	27.17	9.92	15.58
1913	4,631	760.10	623.62	136.47	13.17	12.09	1.08	5.83	3.89	1.94	19.00	15.98	3.02	30.27	11.05	14.54
Porto Rican troops.....1914	669	629.30	548.58	80.72	8.97	8.97	.....	4.48	.....	4.48	13.45	8.97	4.48	22.52	8.22	13.06
1913	594	818.18	730.64	87.54	8.42	6.73	1.68	3.37	3.37	.....	11.79	10.10	1.68	24.58	8.97	10.97
Philippine Scouts.....1914	5,020	714.14	618.33	95.82	9.56	8.76	.80	3.19	2.19	1.00	12.75	10.95	1.80	20.30	7.41	10.37
1913	5,096	681.12	585.36	95.76	9.17	8.59	.57	9.17	2.67	6.49	18.34	11.26	7.06	18.31	6.68	9.81

TABLE NO. 68.—*Admissions to sick report, discharges, and deaths, with ratios per 1,000 of mean strength, in which all available data for the decade ending Dec. 31, 1912, are placed in comparison with the year 1914.*

Causes of admission to sick report.	The Army, 1903–1912. [American troops, enlisted men.]						The Army, 1914. [American troops, enlisted men.]					
Mean strength	S. G. O., 655,804—A. G. O., 667,223.						S. G. O., 87,228—A. G. O., 88,133.					
	Admissions.		Discharges.		Deaths.		Admissions.		Discharges.		Deaths.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Typhoid fever	2,095	3.19	8	0.01	159	0.24	7	0.08			3	0.03
Malarial fevers (total)	46,014	70.16	13	.02	69	.10	1,751	20.07			1	.01
Intermittent	37,001	56.43			4	.01	1,111	12.74				
Estivo-autumnal	8,089	12.33			61	.09	472	5.41			1	.01
Other malarial fevers	924	1.40	13	.02	4	.01	168	1.92				
Smallpox	133	.20			8	.01	7	.08			1	.01
Measles	6,269	9.56	9	.01	70	.10	550	6.31	1	0.01	8	.09
Eruptive fevers, others	1,478	2.25			2	.00	145	1.66			1	.01
Diphtheria	383	.58	1	.00	7	.01	44	.50				
Influenza	17,382	26.50			5	.01	1,072	12.29				
Asiatic cholera	185	.28			111	.17						
Cholera nostras	112	.17					2	.02				
Dysentery	8,520	12.99	220	.33	112	.17	290	3.32	2	.02	4	.05
Yellow fever	30	.05			6	.01						
Leprosy	3	.00	2	.00	1	.00						
Beriberi	649	9.90	9	.01	28	.04						
Erysipelas	449	6.85	1	.00	10	.01	40	.46			1	.01
Dengue	12,758	19.45			1	.00	398	4.56				
Mumps	7,295	11.12	1	.00			776	8.90				
Cerebrospinal fever, including meningitis	161	.25	15	.02	92	.14	24	.27	5	.06	9	.10
Purulent infection and septicemia	96	.15	5	.01	45	.07	9	.10			9	.10
Tuberculosis (all)	2,888	4.40	1,788	2.68	349	.52	292	3.35	182	2.07	41	.47
Venereal (all)	118,056	180.02	1,732	2.60	39	.06	9,655	110.69	67	.76	5	.06
Syphilis and its results	20,609	31.43	1,110	1.66	34	.05	2,007	23.01	43	.49	5	.06
Chancroid and its results	22,015	33.57	12	.02	1	.00	2,572	29.49				
Gonorrhea and its results	75,432	115.02	610	.91	4	.01	5,076	58.20	24	.27		
Cancer and other malignant growths	141	.22	26	.04	58	.09	21	.24	2	.02	10	.11
Rheumatism, acute articular	5,515	8.41	12	.02	8	.01	406	4.65	4	.05		
Rheumatism, chronic articular	3,345	5.10	279	.42	1	.00	89	1.02	3	.03		
Alcoholism and its results	16,942	25.83	159	.24	95	.14	1,303	14.94	16	.18	8	.09
Diseases of the brain and spinal cord	1,832	2.79	1,135	1.70	52	.08	41	.47	10	.11	13	.15
Tetanus	9	.01			7	.01						
Diseases of the heart	3,194	4.87	837	1.25	172	.26	138	1.58	47	.53	17	.19

Varicocele	2,526	3.85	27	0.04			213	2.44				
Adenitis, nonvenereal	4,083	6.23					531	6.09				
Lymphangitis	261	.40	1	.00			14	.16				
Coryza and other diseases of nasal fossæ	13,385	20.41	55	.09			897	10.28	2	.02		
Bronchitis, acute and chronic	27,353	41.71	48	.07	6	.01	2,951	33.83	6	.07		
Pneumonia (all)	1,836	2.80	4	.01	253	.38	243	2.79	1	.01	18	.20
Pleurisy	1,922	2.93	52	.08	18	.03	233	2.67	5	.06		
Tonsilitis and other diseases of the pharynx	43,256	65.96	2	.00	2	.00	4,968	56.96			1	.01
Gastritis	8,444	12.88	53	.08	5	.01	775	8.89	1	.01		
Diarrhea and enteritis	40,714	62.08	74	.11	35	.05	2,738	31.39	4	.05	3	.03
Peritonitis, simple	43	.07	3	.00	15	.02	3	.03			1	.01
Hernia	2,910	4.44	391	.59	11	.02	373	4.28	11	.12	3	.03
Appendicitis	3,238	4.94	39	.06	78	.12	704	8.07	5	.06	13	.15
Disease of the kidneys	1,037	1.58	139	.21	112	.17	82	.94	19	.22	12	.13
Periostitis	541	.82	22	.03			58	.66	2	.02		
Arthritis and synovitis	2,408	3.67	125	.19			313	3.59	19	.22		
All other diseases	203,097	309.69	4,097	6.14	273	.41	3,496	40.08	523	5.93	23	.26
Total for disease	612,988	934.71	11,384	17.06	2,315	3.47	47,056	539.16	1,004	11.39	208	2.36
Total for injuries	133,320	203.29	1,274	1.91	1,598	2.39	11,023	126.37	141	1.60	184	2.09
Grand total	746,308	1,138.00	12,658	18.97	3,913	5.86	58,079	665.83	1,145	12.99	392	4.45

TABLE No. 68½.—*Admissions to sick report, discharges, deaths, and noneffectiveness, wit*
cluding American, Porto Rican, and Philip

Serial Nos.	International classification.	Causes of admission to sick report.	Officers, Army.							
		Mean strength	S. G. O., 4,361—A. G. O., 4,827.							
			Admissions.		Retired.		Deaths.		Noneffective.	
			Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
1	1	Typhoid fever								
2	1a	Paratyphoid fever								
5	2	Typhus fever								
7–11	4	Malaria	95	21.78					4.15	0.9
7		Estivo-autumnal fever	38	8.71					2.16	.5
8		Malarial cachexia	2	.46					.34	.0
9		Quartan malarial fever	2	.46					.03	.0
10		Tertian malarial fever	35	8.03					1.03	.2
11		Undetermined malarial fever	18	4.13					.59	.1
12	5	Smallpox and varioloid								
13	5b	Vaccinia	1	.23					.01	.0
14	6	Measles	4	.92					.18	.0
15	7	Scarlet fever								
17	9	Diphtheria	1	.23					.05	.0
18	10	Influenza	130	29.81					1.97	.4
19	12	Asiatic cholera								
20	13	Cholera nostras								
21–23	14	Dysentery	21	4.82					1.74	.4
21		Bacillary	1	.23						
22		Entamebic	13	2.98					1.52	.3
23		Unclassified	7	1.61					.22	.0
26	17	Leprosy								
27	18	Erysipelas	2	.46					.05	.0
29	19b	Dengue	29	6.65					.49	.1
31	19d	German measles	2	.46					.05	.0
32	19e	Hemoglobinuric fever								
34	19g	Mumps	5	1.15					.15	.0
37	20	Purulent infection and septicemia								
42–46	25	Mycoses	1	.23					.55	.1
48	27	Beriberi								
49–57	28–34	Tuberculosis, all	14	3.21	3	0.62	4	0.83	7.91	1.8
49–51	28	Tuberculosis of lungs	12	2.75	3	.62	4	.83	7.72	1.7
52	29	Miliary tuberculosis, acute								
53–57	30–34	Tuberculosis of other organs	2	.46					.19	.0
58	36	Scoliosis (rickets)								
59–74	37–38	Venereal diseases, all	29	6.65					1.06	.2
59–64	37	Syphilis	15	3.44					.88	.2
65–67	38a	Soft chancre	2	.46						
68–74	38b	Gonococcus infection	12	2.75					.18	.0
75–79	39–45	Cancer and other malignant tumors	5	1.15			4	.82	1.28	.2
80	46	Benign tumors	3	.69					.22	.0
81–85	47–48	Rheumatism, articular, all	28	6.42					2.17	.5
81–82	47	Acute articular rheumatism	18	4.13					.92	.2
83–85	48	Chronic articular rheumatism	10	2.29					1.26	.2
87–88	50	Diabetes	2	.46					.35	.0
89	51	Exophthalmic goitre	1	.23					.11	.0
97–100	56	Alcoholism and results	21	4.82					.44	.1
103–104	59	Other chronic poisoning, including drug habit								
105–106	60	Encephalitis								
107	61	Simple meningitis								
108	61a	Epidemic cerebrospinal meningitis								
109	62	Locomotor ataxia	2	.46	1	.21			.62	.1
110–115	63	Other diseases of spinal cord								
116	64	Cerebral hemorrhage, apoplexy	2	.46			1	.21	.07	.0
117–119	66	Paralysis without specified cause								
120–126	67–68	Mental alienation	6	1.38	4	.83			1.82	.4
127	69	Epilepsy	4	.92	2	.41			.46	.1
129–133	73	Neuralgia and neuritis	31	7.11	1	.21			2.51	.5
138–141	75a	Conjunctivitis	11	2.52					.17	.0
142	75b	Trachoma	1	.23					.17	.0
166	77	Pericarditis								
167	78	Acute endocarditis	2	.46			1	.21	.25	.0
169–174	79	Organic heart disease	11	2.52	6	1.24			1.87	.4
175	80	Angina pectoris								

ratios per 1,000 of mean strength, for the Army; separately for officers, total enlisted (in-pine troops), and grand total, year 1914.

Army, enlisted men (including Porto Rican troops and Philippine Scouts). S. G. O., 92,917—A. G. O., 93,822.								Army (entire), officers and enlisted men (including Porto Rican troops and Philippine Scouts). S. G. O., 97,278—A. G. O., 98,649.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
7	0.08			3	0.03	1.16	0.01	7	0.07			3	0.03	1.16	0.01
11	.12					1.37	.01	11	.11					1.37	.01
19	.20			1	.01	1.05	.01	19	.20			1	.01	1.05	.01
2,773	29.84			1	.01	65.25	.70	2,868	29.48			1	.01	69.40	.71
737	7.93			1	.01	22.40	.24	775	7.97			1	.01	24.56	.25
10	.11					2.39	.03	12	.12					2.73	.03
19	.20					.56	.01	21	.22					.58	.01
1,724	18.55					34.04	.37	1,759	18.09					35.07	.36
283	3.05					5.86	.06	301	3.09					6.45	.07
16	.17			1	.01	.85	.01	16	.16			1	.01	.83	.01
610	6.57					6.83	.07	611	6.28					6.84	.07
567	6.10	1	0.01	8	.03	28.53	.31	571	5.87	1	0.01	8	.08	28.71	.30
29	.31			1	.01	2.30	.02	29	.30			1	.01	2.30	.02
44	.47					3.44	.04	45	.46					3.49	.04
1,072	11.54					17.98	.19	1,202	12.36					19.95	.21
2	.02					.11	.00	2	.02					.11	.00
2	.02					.02	.00	2	.02					.02	.00
340	3.66	2	.02	6	.06	20.32	.22	361	3.71	2	.02	6	.06	22.06	.23
53	.57			1	.01	3.08	.03	54	.56			1	.01	3.08	.03
224	2.41	2	.02	5	.08	15.62	.17	237	2.44	2	.02	5	.05	17.14	.18
63	.68					1.62	.02	70	.72					1.84	.02
4	.04	4	.04			1.09	.01	4	.04	4	.04			1.09	.01
40	.43			1	.01	1.78	.02	42	.43			1	.01	1.83	.02
431	4.64					7.15	.08	460	4.73					7.64	.08
75	.81					2.04	.02	77	.79					2.09	.02
1	.01					.01	.00	1	.01					.01	.00
818	8.80					35.00	.38	823	8.46					35.15	.36
9	.10			9	.10	.99	.01	9	.09			9	.09	.99	.01
7	.08					.22	.00	8	.08					.76	.01
2	.02					.03	.00	2	.02					.03	.00
326	3.51	211	2.25	45	.48	159.10	1.77	340	3.50	211	2.25	49	.50	167.01	1.72
287	3.09	195	2.08	25	.27	148.37	1.66	299	3.07	195	2.08	29	.29	156.09	1.60
5	.05			9	.10	1.06	.01	5	.05			9	.09	1.06	.01
34	.36	16	.17	11	.11	9.67	.10	36	.37	16	.16	11	.11	9.85	.10
2	.02	1	.01			.46	.00	2	.02	1	.01			.46	.01
9,991	107.53	67	.71	6	.06	433.60	4.67	10,020	103.00	67	.71	6	.06	434.66	4.47
2,074	22.32	43	.46	5	.05	123.89	1.33	2,089	21.47	43	.46	5	.05	124.77	1.28
2,618	28.18					101.47	1.09	2,620	26.93					101.47	1.04
5,209	57.03	24	.26	1	.01	208.24	2.24	5,311	54.60	24	.26	1	.01	208.42	2.14
21	.23	2	.02	10	.11	3.93	.04	26	.27	2	.02	14	.14	5.21	.05
127	1.37	1	.01			4.80	.05	130	1.34	1	.01			5.02	.05
519	5.59	7	.07			35.88	.38	547	5.63	7	.07			38.05	.39
428	4.61	4	.04			24.60	.26	446	4.59	4	.04			25.52	.26
91	.98	3	.03			11.28	.12	101	1.04	3	.03			12.54	.13
9	.10	3	.03			1.00	.01	11	.11	3	.03			1.35	.01
19	.20	10	.11			3.85	.04	21	.21	10	.11			3.97	.04
1,306	14.06	16	.17	8	.09	19.49	.21	1,327	13.64	16	.17	8	.08	19.92	.20
35	.38	3	.03			1.08	.01	35	.36	3	.03			1.08	.01
4	.04			4	.04	.14	.00	4	.04			4	.04	.14	.00
8	.09			4	.04	.63	.01	8	.08			4	.04	.63	.01
17	.18	5	.05	6	.06	1.86	.02	17	.17	5	.05	6	.06	1.86	.02
6	.06	2	.02			1.07	.01	8	.08	2	.02			1.70	.02
7	.08	3	.03			1.20	.01	7	.07	3	.03			1.20	.01
3	.03	1	.01	1	.01	.24	.00	5	.05	1	.01	2	.02	.31	.00
25	.27	1	.01			3.08	.03	25	.26	1	.01			3.08	.03
379	4.08	269	2.87	3	.03	83.09	.89	385	3.96	269	2.87	3	.03	84.91	.87
108	1.16	56	.60	2	.02	10.25	.11	112	1.15	56	.60	2	.02	10.71	.11
425	4.57	25	.26			20.87	.22	456	4.69	25	.27			23.38	.24
389	4.19					7.47	.08	400	4.11					7.64	.08
13	.14	3	.03			1.50	.02	14	.14	3	.03			1.66	.02
5	.05			1	.01	.35	.00	5	.05			1	.01	.35	.00
8	.09			1	.01	1.01	.01	10	.10			2	.02	1.26	.01
128	1.38	48	.51	15	.15	14.14	.15	139	1.43	48	.51	15	.15	16.02	.16
5	.05	1	.01			.37	.00	5	.05	1	.01			.37	.00

TABLE No. 68½.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with cluding American, Porto Rican, and Philippine*

Serial Nos.	International classification.	Causes of admission to sick report.	Officers, Army. Mean strength..... S. G. O., 4,361—A. G. O., 4,827							
			Admissions.		Retired.		Deaths.		Noneffective.	
			Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc	4	0.92	4	0.83	1	0.21	1.47	0.34
178–179	82	Embolism and thrombosis	1	.23					.08	.02
181	83b	Hemorrhoids	37	8.48					1.10	.25
183	83d	Varicose veins	2	.46					.12	.03
184	83e	Varicocele	1	.23					.06	.01
185–187	84	Diseases of the lymphatic system	4	.92					.08	.02
193–199	86	Diseases of the nasal fossæ	104	23.85					1.61	.37
200–202	87	Diseases of the larynx	23	5.27					.36	.08
203–204	88	Diseases of the thyroid body								
205–206	89–90	Bronchitis	153	35.08					2.51	.58
207	91	Bronchopneumonia	2	.46					.22	.05
208	92	Pneumonia	5	1.15					.44	.10
209–215	93	Pleurisy	8	1.83					1.24	.29
216–217	94	Pulmonary congestion and pulmonary apoplexy								
219	96	Asthma	7	1.61					.18	.04
220	97	Pulmonary emphysema								
221	98a	Hemoptysis								
222	98b	Hay fever								
224–227	99a	Diseases of the teeth and gums	35	8.03					.42	.10
228–231	99b	Other diseases of the mouth and annexa	5	1.15					.07	.02
232–236	100	Diseases of the pharynx	153	35.08					2.46	.56
238	102	Ulcer of stomach	7	1.61					1.45	.33
239–244	103	Other diseases of stomach (cancer excepted)	77	17.66			1	.21	.75	.17
245–253	105	Diarrhea and enteritis	164	37.61	1	.21			3.61	.83
254	106	Ankylostomiasis								
255–259	107	Intestinal parasites	3	.69					.08	.02
260	108	Appendicitis	33	7.57					2.78	.63
261–263	109	Hernia	12	2.75					1.58	.36
264–267	110a	Diseases of the anus and fecal fistula	5	1.15					.29	.07
268–272	110b	Other diseases of the intestines	60	13.76					1.25	.29
275	113	Cirrhosis of liver	1	.23					.06	.01
276	114	Biliary calculi	1	.23					.02	.00
277–281	115	Other diseases of liver and gall bladder	11	2.52					.33	.08
283–284	117	Simple peritonitis								
288	119	Acute nephritis	5	1.15					.23	.05
289–291	120	Bright's disease	9	2.06	2	.41			.93	.21
293–299	122	Other diseases of the kidney and annexa	3	.69					.89	.20
303–306	124	Diseases of the bladder	5	1.15					.17	.04
304	124b	Enuresis								
307–309	125	Diseases of the urethra, urinary abscess, etc	2	.46					.65	.15
310–312	126	Diseases of the prostate								
313–319	127	Diseases of the male genital organs (nonvenereal)	6	1.38					.12	.03
322–323	143	Furuncle and carbuncle	44	10.09					.98	.23
324–325	144	Acute abscess and cellulitis	33	7.57					.84	.20
352–357	146	Diseases of the bones	14	3.21					1.75	.40
358–360	147	Diseases of the joints	17	3.90	1	.21			2.53	.58
367	149g	Flat foot	4	.92					.98	.23
372	150	Congenital malformations	5	1.15					.12	.03
373–374	154	Senility								
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	9	2.06					.16	.04
379	189Ba	Under observation, undiagnosed and unknown	9	2.06					.42	.10
380	189Bb	Malingering								

ratios per 1,000 of mean strength, for the Army; separately for officers, total enlisted (in-roops), and grand total, year 1914—Continued.

Army, enlisted men (including Porto Rican troops and Philippine Scouts).								Army (entire), officers and enlisted men (including Porto Rican troops and Philippine Scouts).							
S. G. O., 92,917—A. G. O., 93,822.								S. G. O., 97,278—A. G. O., 98,649.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
22	0.24	4	0.04	7	0.07	1.56	0.02	26	0.27	4	0.04	8	0.08	3.04	0.03
3	.03	.....	.....	2	.02	.25	.00	4	.04	.....	.....	2	.02	.33	.00
580	6.24	1	.01	.....	.....	15.88	.17	617	6.34	1	.01	.....	.....	16.98	.17
58	.62	1	.01	.....	.....	4.48	.05	60	.62	1	.01	.....	.....	4.60	.05
215	2.31	.....	.....	.....	.....	11.03	.12	216	2.22	.....	.....	.....	.....	11.09	.11
597	6.42	.....	.....	.....	.....	34.07	.37	601	6.18	.....	.....	.....	.....	34.15	.35
989	10.64	2	.02	.....	.....	13.61	.15	1,093	11.24	2	.02	.....	.....	15.22	.16
227	2.44	.....	.....	1	.01	3.86	.04	250	2.57	.....	.....	1	.01	4.22	.04
16	.17	1	.01	1	.01	1.27	.01	16	.16	1	.01	1	.01	1.27	.01
3,075	33.10	6	.06	.....	.....	59.03	.64	3,228	33.19	6	.06	.....	.....	61.54	.63
49	.53	.....	.....	3	.03	4.48	.05	51	.52	.....	.....	3	.03	4.70	.05
205	2.21	1	.01	15	.16	16.46	.18	210	2.16	1	.01	15	.15	16.91	.17
246	2.65	5	.05	.....	.....	14.62	.16	254	2.61	5	.05	.....	.....	15.86	.16
17	.18	.....	.....	1	.01	.38	.00	17	.17	.....	.....	1	.01	.38	.00
125	1.35	15	.16	.....	.....	10.19	.11	132	1.36	15	.16	.....	.....	10.36	.11
2	.02	.....	.....	.....	.....	.22	.00	2	.02	.....	.....	.....	.....	.22	.00
9	.10	.....	.....	.....	.....	.31	.00	9	.09	.....	.....	.....	.....	.31	.00
3	.03	.....	.....	.....	.....	.04	.00	3	.03	.....	.....	.....	.....	.04	.00
425	4.57	2	.02	.....	.....	7.01	.08	460	4.73	2	.02	.....	.....	7.43	.08
72	.77	.....	.....	.....	.....	1.39	.01	77	.79	.....	.....	.....	.....	1.46	.02
5,003	53.85	.....	.....	1	.01	70.80	.76	5,156	53.01	.....	.....	1	.01	73.26	.75
30	.32	1	.01	3	.03	4.66	.05	37	.38	1	.01	3	.03	6.11	.06
879	9.46	1	.01	2	.02	15.65	.17	956	9.83	1	.01	3	.03	16.39	.17
2,897	31.18	4	.04	3	.03	38.45	.41	3,061	31.47	4	.04	3	.03	42.05	.43
136	1.46	.....	.....	.....	.....	4.15	.04	136	1.40	.....	.....	.....	.....	4.15	.04
152	1.64	.....	.....	.....	.....	3.48	.04	155	1.59	.....	.....	.....	.....	3.56	.04
708	7.62	5	.05	13	.14	52.14	.56	741	7.62	5	.05	13	.13	54.92	.56
382	4.11	11	.12	5	.05	38.79	.42	394	4.03	11	.12	5	.05	40.37	.42
72	.77	.....	.....	.....	.....	4.81	.05	77	.79	.....	.....	.....	.....	5.10	.05
2,173	23.39	9	.10	.....	.....	30.47	.33	2,233	22.96	9	.10	.....	.....	31.72	.33
4	.04	.....	.....	1	.01	.79	.01	5	.05	.....	.....	1	.01	.85	.01
13	.14	.....	.....	.....	.....	.47	.00	14	.14	.....	.....	.....	.....	.49	.01
286	3.08	.....	.....	2	.02	12.49	.13	297	3.05	.....	.....	2	.02	12.83	.13
3	.03	.....	.....	1	.01	.25	.00	3	.03	.....	.....	1	.01	.25	.00
27	.29	.....	.....	3	.03	1.55	.02	32	.33	.....	.....	3	.03	1.78	.02
57	.61	19	.20	9	.09	11.00	.12	66	.68	19	.20	9	.09	11.94	.12
22	.24	3	.03	1	.01	1.77	.02	25	.26	3	.03	1	.01	2.65	.03
152	1.64	26	.28	.....	.....	8.82	.09	157	1.61	26	.28	.....	.....	8.99	.09
74	.80	24	.26	.....	.....	4.87	.05	74	.76	24	.26	.....	.....	4.85	.05
129	1.39	.....	.....	.....	.....	3.60	.04	131	1.35	.....	.....	.....	.....	4.34	.04
8	.09	.....	.....	.....	.....	.47	.00	8	.08	.....	.....	.....	.....	.47	.00
358	3.85	1	.01	.....	.....	11.35	.12	364	3.74	1	.01	.....	.....	11.48	.12
1,484	15.97	.....	.....	.....	.....	24.89	.27	1,528	15.71	.....	.....	.....	.....	25.87	.27
1,154	12.42	1	.01	.....	.....	32.79	.35	1,187	12.20	1	.01	.....	.....	33.63	.35
178	1.92	7	.07	.....	.....	13.48	.15	192	1.97	7	.07	.....	.....	15.23	.16
332	3.57	21	.22	.....	.....	21.78	.23	349	3.59	21	.22	.....	.....	24.30	.25
143	1.54	78	.83	.....	.....	14.53	.16	147	1.51	78	.83	.....	.....	15.52	.16
303	3.26	4	.04	.....	.....	10.21	.11	308	3.17	4	.04	.....	.....	10.32	.11
.....	.....	1	.01	.....	.....	.....	.....	.....	.....	1	.01	.....	.....	.....	.....
206	2.22	.....	.....	.....	.....	4.49	.05	215	2.21	.....	.....	.....	.....	4.64	.05
82	.88	.....	.....	3	.03	2.90	.03	91	.94	.....	.....	3	.03	3.32	.03
37	.40	.....	.....	.....	.....	1.87	.02	37	.38	.....	.....	.....	.....	1.87	.02

TABLE NO. 68½.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with cluding American, Porto Rican, and Philippine*

Serial Nos.	International classification.	Causes of admission to sick report.	Officers, Army. Mean strength..... S. G. O., 4,361—A. G. O., 4,827. Admissions. Number.	Admissions. Ratio.	Retired. Number.	Retired. Ratio.	Deaths. Number.	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[1]								
426–434	155–163	Suicides, all	1	0.23			2	0.41		
435	164	Poisoning by food	16	3.67						
436	165a	Venomous bites and stings	4	.92						
437	165b	Other poisoning (deleterious gases excepted)								
439	167	Burns (conflagrations excepted)	7	1.61						
440	168	Absorption of deleterious gases								
441	168a	Suffocation, strangulation								
442	169	Drowning, accidental					2	.41		
443	170	Traumatism by firearms (other than specified)	6	1.38						
444	170a	Shot by sentry or guard								
445	171	Traumatism by cutting or piercing instruments	22	5.04						
446	172	Traumatism by fall	104	23.85			2	.41		
447	173	Traumatism in mines and quarries								
448	174	Traumatism by machines	4	.92						
449	175	Traumatism by other crushing	15	3.44			2	.41		
450	176	Injuries by animals	41	9.40						
452	178	Effects of excessive cold								
453	179	Effects of heat	6	1.38						
454	180	Effects of lightning					1	.21		
455	181	Effects of electricity								
456–458	182–4	Homicides, all								
460	186	Other external violence	111	25.45			1	.21		
462–466	.....	Killed or wounded in action			1	0.21				
462	.....	By bullet								
463	.....									
464	.....									
465	.....									
466	.....	By other weapon			1	.21				
		DISEASES AND INJURIES GROUPED.								
		General diseases	402	92.18	4	.83	8	1.66	23.82	5.46
	1–19	Epidemic diseases	295	67.65					8.89	2.04
	20–59	Other general diseases	107	24.54	4	.83	8	1.66	14.93	3.42
		Diseases of the nervous system and organs of special sense	164	37.60	11	2.28	1	.21	14.35	3.30
	60–74	Of the nervous system	90	20.64	11	2.28	1	.21	9.37	2.15
	75	Of the eye and its annexa	51	11.69					2.99	.69
	76	Of the ear and its annexa	23	5.27					1.99	.46
	77–85	Diseases of the circulatory system	71	16.28	10	2.07	2	.41	5.43	1.25
	86–98	Diseases of the respiratory system	302	69.25					6.57	1.51
	99–118	Diseases of the digestive system	569	130.48	1	.21	2	.41	15.33	3.51
	119–127	Diseases of the genito-urinary system	43	9.86	2	.41			3.32	.76
	142–145	Diseases of the skin and cellular tissue	127	29.12					4.64	1.06
	146–149	Diseases of the organs of locomotion	109	24.99	1	.21			8.07	1.85
	150	Malformations, etc	5	1.15					.12	.03
	154	Diseases, results of old age								
	189	Ill-defined diseases	25	5.73					.62	.14
		Total for disease	1,817	416.65	29	6.01	13	2.69	82.27	18.86
	155–186	External causes	345	79.11	1	.21	10	2.07	18.55	4.25
		Total for disease and external causes	2,162	495.76	30	6.22	23	4.76	100.81	23.12

[1] Noneffectiveness for individual external causes not tabulated.

tios per 1,000 of mean strength, for the Army; separately for officers, total enlisted (in-oops), and grand total, year 1914—Continued.

Army, enlisted men (including Porto Rican troops and Philippine Scouts).								Army (entire), officers and enlisted men (including Porto Rican troops and Philippine Scouts).							
S. G. O., 92,917—A. G. O., 93,822.								S. G. O., 97,278—A. G. O., 98,649.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
15	0.16			46	0.49			16	0.16			48	0.49		
192	2.07			4	.04			208	2.14			4	.04		
107	1.15							111	1.14						
64	.69			13	.14			64	.66			13	.13		
346	3.72	3	0.03					353	3.63	3	0.03				
6	.06			1	.01			6	.06			1	.01		
2	.02							2	.02						
				49	.52							51	.52		
235	2.53	27	.29	14	.15			241	2.48	27	.29	14	.14		
4	.04							4	.04						
935	10.06	7	.07					957	9.84	7	.07				
3,329	35.83	21	.22	8	.09			3,433	35.29	21	.22	10	.10		
5	.05							5	.05						
83	.89	1	.01					87	.89	1	.01				
808	8.70	29	.31	17	.18			823	8.46	29	.31	19	.19		
1,067	11.48	6	.06	2	.02			1,108	11.39	6	.06	2	.02		
54	.58			3	.03			54	.56			3	.03		
159	1.71			1	.01			165	1.70			1	.01		
1	.01							1	.01			1	.01		
3	.03							3	.03						
15	.16			27	.29			15	.15			27	.27		
4,000	43.05	23	.25	7	.07			4,111	42.26	23	.25	8	.08		
1	.01	4	.04					1	.01	4	.04				
1	.01	4	.04					1	.01	4	.04				
9,711	212.13	331	3.53	101	1.08	870.07	9.36	20,113	206.76	331	3.53	109	1.10	893.89	9.19
7,301	78.58	7	.07	22	.23	202.03	2.17	7,596	78.09	7	.07	22	.22	210.92	2.17
2,410	133.56	324	3.45	79	.84	668.04	7.19	12,517	128.67	324	3.45	87	.88	682.98	7.02
2,606	28.04	418	4.45	21	.22	186.22	2.00	2,770	28.48	418	4.45	22	.22	200.57	2.07
1,226	13.19	384	4.09	21	.22	138.25	1.49	1,316	13.53	384	4.09	22	.22	147.62	1.52
829	8.92	21	.22			29.87	.32	880	9.05	21	.22			32.87	.34
551	5.93	13	.14			18.09	.19	574	5.90	15	.14			20.08	.21
1,732	18.64	62	.66	26	.28	89.12	.96	1,803	18.53	62	.66	28	.28	94.55	.97
4,980	53.60	30	.32	21	.22	124.71	1.34	5,282	54.30	30	.32	21	.21	131.28	1.35
3,250	142.60	34	.36	34	.36	288.15	3.10	13,819	142.06	34	.36	36	.36	303.48	3.12
790	8.50	50	.53	13	.14	40.70	.44	833	8.56	50	.53	13	.13	44.02	.45
4,761	51.24	10	.11			117.62	1.27	4,888	50.25	10	.11			122.26	1.26
1,942	20.90	114	1.22			83.75	.90	2,051	21.08	114	1.22			91.81	.94
303	3.26	4	.04			10.21	.11	308	3.17	4	.04			10.32	.11
		1	.01							1	.01				
452	4.86			3	.03	10.88	.12	477	4.90			3	.03	11.50	.12
50,527	543.79	1,054	11.23	219	2.33	1,821.42	19.60	52,344	538.09	1,054	11.23	232	2.35	1,903.68	19.57
11,558	124.39	145	1.55	192	2.05	391.11	4.21	11,903	122.36	145	1.55	202	2.05	409.65	4.21
62,085	668.18	1,199	12.78	411	4.38	2,212.52	23.81	64,247	660.45	1,199	12.78	434	4.40	2,313.34	23.78

TABLE No. 69.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with year*

Serial Nos.	International classification.	Causes of admission to sick report.	Officers, Army. Mean strength: A. G. O., 4,827—S. G. O., 4,361. Admissions. Number.	Admissions. Ratio.	Retired. Number.	Retired. Ratio.	Deaths. Number.	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
1	1	Typhoid fever								
2	1a	Paratyphoid fever								
5	2	Typhus fever								
7-11	4	Malaria	95	21.78					4.15	0.95
7		Estivo-autumnal fever	38	8.71					2.16	.50
8		Malarial cachexia	2	.46					.34	.08
9		Quartan malarial fever	2	.46					.03	.01
10		Tertial malarial fever	35	8.03					1.03	.24
11		Undetermined malarial fever	18	4.13					.59	.14
12	5	Smallpox and varioloid								
13	5b	Vaccinia	1	.23					.01	.00
14	6	Measles	4	.92					.18	.04
15	7	Scarlet fever								
17	9	Diphtheria	1	.23					.05	.01
18	10	Influenza	130	29.81					1.97	.45
19	12	Asiatic cholera								
20	13	Cholera nostras								
21-23	14	Dysentery	21	4.82					1.74	.40
21		Bacillary	1	.23						
22		Entamebic	13	2.98					1.52	.35
23		Unclassified	7	1.61					.22	.05
27	18	Erysipelas	2	.46					.05	.01
29	19b	Dengue	29	6.65					.49	.11
31	19d	German measles	2	.46					.05	.01
32	19e	Hemoglobinuric fever								
34	19g	Mumps	5	1.15					.15	.03
37	20	Purulent infection and septicemia								
42-46	25	Mycoses	1	.23					.55	.13
49-57	28-34	Tuberculosis, all	14	3.21	3	0.62	4	0.83	7.91	1.81
49-51	28	Tuberculosis of lungs	12	2.75	3	.62	4	.83	7.72	1.77
52	29	Miliary tuberculosis, acute								
53-57	30-34	Tuberculosis of other organs	2	.46					.19	.04
58	36	Scoliosis (rickets)								
59-74	37-38	Venereal diseases, all	29	6.65					1.06	.24
59-64	37	Syphilis	15	3.44					.88	.20
65-67	38a	Soft chancre	2	.46						
68-74	38b	Gonococcus infection	12	2.75					.18	.04
75-79	39-45	Cancer and other malignant tumors	5	1.15			4	.82	1.28	.29
80	46	Benign tumors	3	.69					.22	.05
81-85	47-48	Rheumatism, articular, all	28	6.42					2.17	.50
81-82	47	Acute articular rheumatism	18	4.13					.92	.21
83-85	48	Chronic articular rheumatism	10	2.29					1.26	.29
87-88	50	Diabetes	2	.46					.35	.08
89	51	Exophthalmic goitre	1	.23					.11	.03
97-100	56	Alcoholism and results	21	4.82					.44	.10
103-104	59	Other chronic poisoning, including drug habit								
105-106	60	Encephalitis								
107	61	Simple meningitis								
108	61a	Epidemic cerebrospinal meningitis								
109	62	Locomotor ataxia	2	.46	1	.21			.62	.14
110-115	63	Other diseases of spinal chord								
116	64	Cerebral hemorrhage, apoplexy	2	.46			1	.21	.07	.02
117-119	66	Paralysis without specified cause								
120-126	67-68	Mental alienation	6	1.38	4	.83			1.82	.42
127	69	Epilepsy	4	.92	2	.41			.46	.10
129-133	73	Neuralgia and neuritis	31	7.11	1	.21			2.51	.59
138-141	75a	Conjunctivitis	11	2.52					.17	.04
142	75b	Trachoma	1	.23					.17	.04
166	77	Pericarditis								
167	78	Acute endocarditis	2	.46			1	.21	.25	.06
169-174	79	Organic heart disease	11	2.52	6	1.24			1.87	.43
175	80	Angina pectoris								
176-177½	81	Diseases of the arteries, atheroma, aneurism, etc	4	.92	4	.83	1	.21	1.47	.34
178-179	82	Embolism and thrombosis	1	.23					.08	.02

atios per 1,000 of mean strength, for the Army, officers and American troops, for the '1914.

American troops, Army.								Officers and American troops, Army.							
A. G. O., 88,133—S. G. O., 87,228.								A. G. O., 92,960—S. G. O., 91,589.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
7	0.08			3	0.03	1.16	0.01	7	0.08			3	0.03	1.16	0.01
9	.10					1.06	.01	9	.10					1.06	.01
1	.01					.15	.00	1	.01					.15	.00
1,751	20.07			1	.01	47.64	.55	1,846	20.16			1	.01	51.79	.57
472	5.41			1	.01	17.36	.20	510	5.57			1	.01	19.52	.21
9	.10					2.08	.02	11	.12					2.42	.03
17	.19					.53	.01	19	.21					.56	.01
1,094	12.54					23.70	.27	1,129	12.33					24.73	.27
159	1.82					3.98	.05	177	1.93					4.57	.50
7	.08			1	.01	.21	.00	7	.08			1	.01	.21	.00
596	6.83					6.60	.08	597	6.52					6.61	.07
550	6.31	1	0.01	8	.09	27.71	.32	554	6.05	1	0.01	8	.09	27.89	.30
29	.33			1	.01	2.30	.03	29	.32			1	.01	2.30	.03
44	.50					3.44	.04	45	.49					3.49	.04
1,072	12.29					17.98	.21	1,202	13.12					19.95	.22
						.05	.00							.05	.00
2	.02					.02	.00	2	.02					.02	.00
290	3.32	2	.02	4	.05	18.22	.21	311	3.40	2	0.02	4	.04	19.96	.22
47	.54			1	.01	2.78	.03	48	.52			1	.01	2.78	.03
181	2.08	2	.02	3	.03	13.85	.16	194	2.12	2	.02	3	.03	15.37	.17
62	.71					1.59	.02	69	.75					1.81	.02
40	.46			1	.01	1.78	.02	42	.46			1	.01	1.83	.02
398	4.56					6.58	.08	427	4.66					7.07	.08
75	.86					2.04	.02	77	.84					2.09	.02
1	.01					.01	.00	1	.01					.01	.00
776	8.90					32.92	.38	781	8.53					33.07	.36
9	.10			9	.10	.99	.01	9	.10			9	.10	.99	.01
7	.08					.22	.00	8	.09					.77	.01
292	3.35	182	2.07	41	.47	154.66	1.77	306	3.34	182	2.07	45	.48	162.57	1.77
260	2.98	170	1.93	23	.26	145.43	1.67	272	2.97	170	1.93	27	.29	153.15	1.67
4	.05			8	.09	.96	.01	4	.04			8	.09	.96	.01
28	.31	12	.13	10	.11	8.27	.09	30	.33	12	.13	10	.11	8.46	.09
1	.01	1	.01			.45	.01	1	.01	1	.01			.45	.01
9,655	110.69	67	.76	5	.06	412.52	4.73	9,684	105.73	67	.76	5	.05	413.58	4.52
2,007	23.01	43	.49	5	.06	118.35	1.36	2,022	22.08	43	.49	5	.05	119.23	1.30
2,572	29.49					98.70	1.13	2,574	28.10					98.70	1.08
5,076	58.20	24	.27			195.47	2.24	5,088	55.55	24	.27			195.65	2.14
21	.24	2	.02	10	.11	3.93	.05	26	.28	2	.02	14	.15	5.21	.06
116	1.33	1	.01			4.40	.05	119	1.30	1	.01			4.62	.05
495	5.67	7	.08			34.58	.39	523	5.71	7	.08			36.75	.40
406	4.65	4	.05			23.72	.27	424	4.63	4	.05			24.64	.27
89	1.02	3	.03			10.85	.12	99	1.08	3	.03			12.11	.13
9	.10	3	.03			1.00	.01	11	.12	3	.03			1.35	.01
19	.22	10	.11			3.85	.04	20	.22	10	.11			3.96	.04
1,303	14.94	16	.18	8	.09	19.47	.22	1,324	14.46	16	.18	8	.09	19.91	.22
35	.40	3	.03			1.08	.01	35	.38	3	.03			1.08	.01
4	.05			4	.05	.14	.00	4	.04			4	.04	.14	.00
7	.08			3	.03	.61	.01	7	.08			3	.03	.61	.01
17	.19	5	.06	6	.07	1.86	.02	17	.19	5	.06	6	.06	1.86	.02
6	.07	2	.02			1.07	.01	8	.09	2	.02			1.69	.02
7	.08	3	.03			1.20	.01	7	.08	3	.03			1.20	.01
3	.03	1	.01	1	.01	.24	.00	5	.05	1	.01	2	.02	.31	.00
24	.27	1	.01			2.92	.03	24	.26	1	.01			2.92	.03
365	4.18	259	2.94	3	.03	82.30	.94	371	4.05	259	2.94	3	.03	84.12	.92
108	1.24	56	.64	2	.02	10.25	.12	112	1.22	56	.64	2	.02	10.71	.12
408	4.68	24	.27			19.82	.23	439	4.79	24	.27			22.33	.24
343	3.93					6.50	.07	354	3.87					6.67	.07
12	.14	3	.03			1.46	.02	13	.14	3	.03			1.63	.02
5	.06			1	.01	.35	.00	5	.05			1	.01	.35	.00
8	.09			1	.01	1.01	.01	10	.11			2	.02	1.26	.01
125	1.43	47	.53	15	.17	13.56	.16	136	1.48	47	.53	15	.16	15.43	.17
5	.06	1	.01			.37	.00	5	.05	1	.01			.37	.00
22	.25	4	.05	7	.08	1.56	.02	26	.28	4	.05	8	.09	3.03	.00
3	.03			2	.02	.25	.00	4	.04			2	.02	.33	.03

TABLE No. 69.—*Admissions to sick report, discharges, deaths, and noneffectiveness, wit year 1914—*

Serial Nos.	International classification.	Causes of admission to sick report.	Officers, Army. Mean strength..... A. G. O., 4,827—S. G. O., 4,361. Admissions. Number.	Admissions. Ratio.	Retired. Number.	Retired. Ratio.	Deaths. Number.	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
181	83b	Hemorrhoids	37	8.48					1.10	0.2
183	83d	Varicose veins	2	.46					.12	.0
184	83e	Varicocele	1	.23					.06	.0
185–187	84	Diseases of the lymphatic system	4	.92					.08	.0
193–199	86	Diseases of the nasal fossæ	104	23.85					1.61	.3
200–202	87	Diseases of the larynx	23	5.27					.36	.0
203–204	88	Diseases of the thyroid body								
205–206	89–90	Bronchitis	153	35.08					2.51	.5
207	91	Broncho-pneumonia	2	.46					.22	.0
208	92	Pneumonia	5	1.15					.44	.1
209–215	93	Pleurisy	8	1.83					1.24	.2
216–217	94	Pulmonary congestion and pulmonary apoplexy								
219	96	Asthma	7	1.61					.18	.0
220	97	Pulmonary emphysema								
221	98a	Hæmoptysis								
222	98b	Hay fever								
224–227	99a	Diseases of the teeth and gums	35	8.03					.42	.1
228–231	99b	Other diseases of the mouth and annexa	5	1.15					.07	.0
232–236	100	Diseases of the pharynx	153	35.08					2.46	.5
238	102	Ulcer of stomach	7	1.61					1.45	.3
239–244	103	Other diseases of stomach (cancer excepted)	77	17.66			1	0.21	.75	.1
245–253	105	Diarrhea and enteritis	164	37.61	1	0.21			3.61	.8
254	106	Ankylostomiasis								
255–259	107	Intestinal parasites	3	.69					.08	.0
260	108	Appendicitis	33	7.57					2.78	.6
261–263	109	Hernia	12	2.75					1.58	.3
264–267	110a	Diseases of the anus and fecal fistula	5	1.15					.29	.0
268–272	110b	Other diseases of the intestines	60	13.76					1.25	.2
275	113	Cirrhosis of liver	1	.23					.06	.0
276	114	Biliary calculi	1	.23					.02	.0
277–281	115	Other diseases of liver and gall bladder	11	2.52					.33	.0
283–284	117	Simple peritonitis								
288	119	Acute nephritis	5	1.15					.23	.0
289–291	120	Bright's disease	9	2.06	2	.41			.93	.2
293–299	122	Other diseases of the kidney and annexa	3	.69					.89	.2
303–306	124	Diseases of the bladder	5	1.15					.17	.0
304	124b	Enuresis								
307–309	125	Diseases of the urethra, urinary abscess, etc	2	.46					.65	.1
310–312	126	Diseases of the prostate								
313–319	127	Diseases of the male genital organs (nonvenereal)	6	1.38					.12	.0
322–323	143	Furuncle and carbuncle	44	10.09					.98	.2
324–325	144	Acute abscess and cellulitis	33	7.57					.84	.2
352–357	146	Diseases of the bones	14	3.21					1.75	.4
358–360	147	Diseases of the joints	17	3.90	1	.21			2.53	.5
367	149g	Flat foot	4	.92					.98	.2
372	150	Congenital malformations	5	1.15					.12	.0
373–374	154	Senility								
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	9	2.06					.16	.0
379	189Ba	Under observation, undiagnosed and unknown	9	2.06					.42	.1
380	189Bb	Malingering								

ratios per 1,000 of mean strength, for the Army, officers and American troops, for the
Continued.

American troops, Army.								Officers and American troops, Army.							
A. G. O., 88,133—S. G. O., 87,228.								A. G. O., 92,960—S. G. O., 91,589.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
576	6.60	1	0.01	.....	.....	15.68	0.18	613	6.69	1	0.01	.....	.....	16.78	0.18
58	.66	1	.01	.....	.....	4.48	.05	60	.66	1	.01	.....	.....	4.60	.05
213	2.44	.....	.....	.....	.....	10.96	.13	214	2.34	.....	.....	.....	.....	11.02	.12
548	6.28	.....	.....	.....	.....	31.89	.37	552	6.03	.....	.....	.....	.....	31.97	.35
897	10.28	2	.02	.....	.....	12.48	.14	1,001	10.93	2	.02	.....	.....	14.09	.15
221	2.53	.....	.....	1	0.01	3.69	.04	244	2.66	.....	.....	1	0.01	4.05	.04
16	.18	1	.01	1	.01	1.27	.01	16	.17	1	.01	1	.01	1.27	.01
2,951	33.83	6	.07	.....	.....	56.00	.64	3,104	33.89	6	.07	.....	.....	83.51	.64
47	.54	.....	.....	3	.03	4.06	.05	49	.53	.....	.....	3	.03	4.28	.05
196	2.25	1	.01	15	.17	15.44	.18	201	2.19	1	.01	15	.16	15.88	.17
233	2.67	5	.06	.....	.....	13.97	.16	241	2.63	5	.06	.....	.....	15.21	.17
17	.19	.....	.....	1	.01	.38	.00	17	.19	.....	.....	1	.01	.38	.00
120	1.36	15	.17	.....	.....	9.92	.11	127	1.39	15	.17	.....	.....	10.10	.11
2	.02	.....	.....	.....	.....	.22	.00	2	.02	.....	.....	.....	.....	.22	.00
8	.09	.....	.....	.....	.....	.29	.00	8	.09	.....	.....	.....	.....	.29	.00
3	.03	.....	.....	.....	.....	.04	.00	3	.03	.....	.....	.....	.....	.04	.00
405	4.64	2	.02	.....	.....	6.78	.08	440	4.80	2	.02	.....	.....	7.20	.08
68	.78	.....	.....	.....	.....	1.32	.02	73	.80	.....	.....	.....	.....	1.39	.02
4,968	56.96	.....	.....	1	.01	70.28	.81	5,121	55.91	.....	.....	1	.01	72.74	.79
30	.34	1	.01	3	.03	4.66	.05	37	.40	1	.01	3	.03	6.11	.07
843	9.66	1	.01	2	.02	15.26	.18	920	10.04	1	.01	3	.03	16.01	.18
2,738	31.39	4	.05	3	.03	36.40	.42	2,902	31.69	4	.05	3	.03	40.01	.43
49	.56	.....	.....	.....	.....	1.59	.02	49	.53	.....	.....	.....	.....	1.59	.02
95	1.09	.....	.....	.....	.....	1.93	.02	98	1.07	.....	.....	.....	.....	2.01	.02
704	8.07	5	.06	13	.15	51.48	.59	737	8.05	5	.06	13	.14	54.26	.59
373	4.28	11	.12	3	.03	38.05	.44	385	4.20	11	.12	3	.03	39.63	.43
70	.80	.....	.....	.....	.....	4.75	.05	75	.82	.....	.....	.....	.....	5.04	.06
1,933	22.16	8	.09	.....	.....	27.77	.32	1,993	21.76	8	.09	.....	.....	29.02	.32
4	.05	.....	.....	1	.01	.79	.01	5	.05	.....	.....	1	.01	.85	.01
12	.14	.....	.....	.....	.....	.46	.01	13	.14	.....	.....	.....	.....	.48	.01
281	3.22	.....	.....	2	.02	12.28	.14	292	3.19	.....	.....	2	.02	12.61	.14
3	.03	.....	.....	1	.01	.25	.00	3	.03	.....	.....	1	.01	.25	.00
25	.29	.....	.....	3	.03	1.52	.02	30	.33	.....	.....	3	.03	1.75	.02
57	.65	19	.22	9	.10	10.95	.13	66	.72	19	.22	9	.10	11.88	.13
22	.25	3	.03	1	.01	1.77	.02	25	.27	3	.03	1	.01	2.66	.03
151	1.73	26	.30	.....	.....	8.63	.10	156	1.70	26	.30	.....	.....	8.80	.10
74	.89	24	.27	.....	.....	4.82	.06	74	.81	24	.27	.....	.....	4.82	.05
118	1.35	.....	.....	.....	.....	3.32	.04	120	1.31	.....	.....	.....	.....	3.97	.04
8	.09	.....	.....	.....	.....	.47	.01	8	.09	.....	.....	.....	.....	.47	.01
326	3.74	1	.01	.....	.....	10.36	.12	332	3.62	1	.01	.....	.....	10.48	.11
1,320	15.13	.....	.....	.....	.....	21.52	.24	1,364	14.89	.....	.....	.....	.....	22.50	.24
983	11.26	1	.01	.....	.....	28.19	.32	1,016	11.09	1	.01	.....	.....	29.03	.32
172	1.97	7	.08	.....	.....	13.04	.15	186	2.03	7	.08	.....	.....	14.77	.16
313	3.59	19	.22	.....	.....	20.95	.24	330	3.60	19	.22	.....	.....	23.48	.26
142	1.63	78	.89	.....	.....	14.46	.17	146	1.59	78	.89	.....	.....	15.44	.17
269	3.08	4	.05	.....	.....	8.79	.10	274	2.99	4	.05	.....	.....	8.91	.10
.....	.....	1	.01	.....	.....	.....	.....	.....	.....	1	.01	.....	.....	.....	.....
186	2.13	.....	.....	.....	.....	4.12	.05	195	2.13	.....	.....	.....	.....	4.28	.05
81	.93	.....	.....	3	.03	2.88	.03	90	.98	.....	.....	3	.03	3.30	.04
33	.38	.....	.....	.....	.....	1.79	.02	33	.36	.....	.....	.....	.....	1.79	.02

TABLE No. 69.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with year 1914—*

Serial Nos.	International classification.	Causes of admission to sick report.	Officers, Army. Mean strength..... A. G. O., 4,827—S. G. O., 4,361. Admissions. Number.	Admissions. Ratio.	Retired. Number.	Retired. Ratio.	Deaths. Number.	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[1]								
426–434	155–163	Suicides, all	1	0.23			2	0.41		
435	164	Poisoning by food	16	3.67						
436	165a	Venomous bites and stings	4	.92						
437	165b	Other poisoning (deleterious gases excepted)								
439	167	Burns (conflagrations excepted)	7	1.61						
440	168	Absorption of deleterious gases								
441	168a	Suffocation, strangulation								
442	169	Drowning, accidental					2	.41		
443	170	Traumatism by firearms (other than specified)	6	1.38						
444	170a	Shot by sentry or guard								
445	171	Traumatism by cutting or piercing instruments	22	5.04						
446	172	Traumatism by fall	104	23.85			2	.41		
447	173	Traumatism in mines and quarries								
448	174	Traumatism by machines	4	.92						
449	175	Traumatism by other crushing	15	3.44			2	.41		
450	176	Injuries by animals	41	9.40						
452	178	Effects of excessive cold								
453	179	Effects of heat	6	1.38						
454	180	Effects of lightning					1	.21		
455	181	Effects of electricity								
456–458	182–4	Homicides, all								
460	186	Other external violence	111	25.45			1	.21		
462–466		Killed or wounded in action			1	0.21				
462		By bullet								
466		By other weapon			1	.21				
		DISEASES AND INJURIES GROUPED.								
		General diseases	402	92.18	4	.83	8	1.66	23.82	5.4
	1–19	Epidemic diseases	295	67.65					8.89	2.0
	20–59	Other general diseases	107	24.54	4	.83	8	1.66	14.93	3.4
		Diseases of the nervous system and organs of special sense	164	37.60	11	2.28	1	.21	14.35	3.3
	60–74	Of the nervous system	90	20.64	11	2.28	1	.21	9.37	2.1
	75	Of the eye and its annexa	51	11.69					2.99	.6
	76	Of the ear and its annexa	23	5.27					1.99	.4
	77–85	Diseases of the circulatory system	71	16.28	10	2.07	2	.41	5.43	1.2
	86–98	Diseases of the respiratory system	302	69.25					6.57	1.5
	99–118	Diseases of the digestive system	569	130.48	1	.21	2	.41	15.33	3.5
	119–127	Diseases of the genito-urinary system	43	9.86	2	.41			3.32	.7
	142–145	Diseases of the skin and cellular tissue	127	29.12					4.64	1.0
	146–149	Diseases of the organs of locomotion	109	24.99	1	.21			8.07	1.8
	150	Malformations, etc	5	1.15					.12	.0
	154	Diseases, results of old age								
	189	Ill-defined diseases	25	5.73					.62	.1
		Total for disease	1,817	416.65	29	6.01	13	2.69	82.27	18.9
	155–186	External causes	345	79.11	1	.21	10	2.07	18.55	4.2
		Total for disease and external causes	2,162	495.76	30	6.22	23	4.76	100.81	23.

[1] Noneffectiveness for individual external causes not tabulated.

ıtios per 1,000 of mean strength, for the Army, officers and American troops, for the ontinued.

American troops, Army.								Officers and American troops, Army.							
A. G. O., 88,133—S. G. O., 87,228.								A. G. O., 92,960—S. G. O., 91,589.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Dis-charges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
15	0.17	.....	.....	44	0.50	.....	.....	16	0.17	.....	.....	46	0.49	.....	.....
189	2.17	.....	.....	3	.03	.....	.....	205	2.24	.....	.....	3	.03	.....	.....
93	1.07	.....	.....	.....	.....	.....	.....	97	1.06	.....	.....	.....	.....	.....	.....
63	.72	.....	.....	12	.14	.....	.....	63	.69	.....	.....	12	.13	.....	.....
327	3.75	3	0.03	.....	.....	.....	.....	334	3.65	3	0.03	.....	.....	.....	.....
6	.07	.....	.....	1	.01	.....	.....	6	.07	.....	.....	1	.01	.....	.....
2	.02	.....	.....	.....	.....	.....	.....	2	.02	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	49	.56	.....	.....	.....	.....	.....	.....	51	.55	.....	.....
225	2.58	26	.30	14	.16	.....	.....	231	2.52	26	.30	14	.15	.....	.....
4	.05	.....	.....	.....	.....	.....	.....	4	.04	.....	.....	.....	.....	.....	.....
860	9.86	7	.08	.....	.....	.....	.....	882	9.63	7	.08	.....	.....	.....	.....
3,191	36.58	21	.24	7	.08	.....	.....	3,295	35.98	21	.24	9	.10	.....	.....
5	.06	.....	.....	.....	.....	.....	.....	5	.05	.....	.....	.....	.....	.....	.....
76	.87	1	.01	.....	.....	.....	.....	80	.87	1	.01	.....	.....	.....	.....
766	8.78	29	.33	16	.18	.....	.....	781	8.53	29	.33	18	.19	.....	.....
1,065	12.21	6	.07	2	.02	.....	.....	1,106	12.08	6	.07	2	.02	.....	.....
54	.62	.....	.....	3	.03	.....	.....	54	.59	.....	.....	3	.03	.....	.....
143	1.64	.....	.....	1	.01	.....	.....	149	1.63	.....	.....	1	.01	.....	.....
1	.01	.....	.....	.....	.....	.....	.....	1	.01	.....	.....	1	.01	.....	.....
3	.03	.....	.....	.....	.....	.....	.....	3	.03	.....	.....	.....	.....	.....	.....
15	.17	.....	.....	25	.28	.....	.....	15	.16	.....	.....	25	.27	.....	.....
3,799	43.55	23	.26	7	.08	.....	.....	3,910	42.69	23	.26	8	.09	.....	.....
.....	.....	1	.01	.....	.....	.....	.....	.....	.....	1	.01	.....	.....	.....	.....
.....	.....	1	.01	.....	.....	.....	.....	.....	.....	1	.01	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
18,056	207.00	298	3.38	93	1.06	814.84	9.34	18,458	201.53	298	3.38	101	1.09	838.66	9.16
6,060	69.47	3	.03	19	.22	174.46	2.00	6,355	69.39	3	.03	19	.20	183.35	2.00
11,996	137.52	295	3.35	74	.84	640.38	7.34	12,103	132.14	295	3.35	82	.88	655.31	7.15
2,474	28.37	405	4.60	20	.23	181.31	2.08	2,638	28.80	405	4.60	21	.23	195.66	2.13
1,187	13.61	373	4.23	20	.23	136.13	1.56	1,277	13.94	373	4.23	21	.23	145.50	1.59
757	8.68	19	.22	.....	.....	27.50	.32	808	8.82	19	.22	.....	.....	30.49	.33
530	6.08	13	.15	.....	.....	17.68	.20	553	6.04	13	.15	.....	.....	19.67	.21
1,672	19.17	61	.69	26	.30	85.89	.99	1,743	19.03	61	.69	28	.30	91.33	1.00
4,726	54.18	30	.34	21	.24	117.98	1.35	5,028	54.90	30	.34	21	.23	124.55	1.36
12,591	144.35	33	.37	32	.36	276.38	3.17	13,160	143.69	33	.37	34	.37	291.71	3.18
741	8.49	50	.57	13	.15	39.02	.45	784	8.56	50	.57	13	.14	42.34	.46
4,230	48.49	10	.11	.....	.....	104.28	1.20	4,357	47.57	10	.11	.....	.....	108.92	1.19
1,873	21.47	112	1.27	.....	.....	81.67	.94	1,982	21.64	112	1.27	.....	.....	89.74	.98
269	3.08	4	.05	.....	.....	8.79	.10	274	2.99	4	.05	.....	.....	8.91	.10
.....	.....	1	.01	.....	.....	.....	.....	.....	.....	1	.01	.....	.....	.....	.....
421	4.86	.....	.....	3	.03	10.34	.12	449	4.90	.....	.....	3	.03	10.96	.12
47,056	539.46	1,004	11.39	208	2.36	1,720.48	19.72	48,873	533.61	1,004	11.39	221	2.38	1,802.75	19.68
11,023	126.37	141	1.60	184	2.09	375.09	4.30	11,368	124.12	141	1.60	194	2.09	393.64	4.30
58,079	665.83	1,145	12.99	392	4.45	2,095.57	24.02	60,241	657.73	1,145	12.99	415	4.46	2,196.38	23.98

TABLE No. 70.—*Admissions to sick report, discharges, deaths, and noneffectiveness, white and colored,*

Serial Nos.	International classification.	Causes of admission to sick report.	Army, American troops, white and colored. S. G. O., 87,228—A. G. O., 88,133. Admissions. Number.	Admissions. Ratio.	Discharges. Number.	Discharges. Ratio.	Deaths. Number.	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
1	1	Typhoid fever	7	0.08			3	0.03	1.16	0.01
2	1a	Paratyphoid fever	9	.10					1.06	.01
5	2	Typhus fever	1	.01					.15	.00
7–11	4	Malaria	1,751	20.07			1	.01	47.64	.55
7		Estivo-autumnal fever	472	5.41			1	.01	17.36	.20
8		Malarial cachexia	9	.10					2.08	.02
9		Quartan malarial fever	17	.19					.53	.01
10		Tertian malarial fever	1,094	12.54					23.70	.27
11		Undetermined malarial fever	159	1.82					3.98	.05
12	5	Smallpox and varioloid	7	.08			1	.01	.21	.00
13	5b	Vaccinia	596	6.83					6.60	.08
14	6	Measles	550	6.31	1	0.01	8	.09	27.71	.32
15	7	Scarlet fever	29	.33			1	.01	2.30	.03
17	9	Diphtheria	44	.50					3.44	.04
18	10	Influenza	1,072	12.29					17.98	.21
19	12	Asiatic cholera							.05	.00
20	13	Cholera nostras	2	.02					.02	.00
21–23	14	Dysentery	290	3.32	2	.02	4	.05	18.22	.21
21		Bacillary	47	.54			1	.01	2.78	.03
22		Entamebic	181	2.08	2	.02	3	.03	13.85	.16
23		Unclassified	62	.71					1.59	.02
26	17	Leprosy								
27	18	Erysipelas	40	.46			1	.01	1.78	.02
29	19b	Dengue	398	4.56					6.58	.08
31	19d	German measles	75	.86					2.04	.02
32	19e	Hemoglobinuric fever	1	.01					.01	.00
34	19g	Mumps	776	8.90					32.92	.38
37	20	Purulent infection and septicemia	9	.10			9	.10	.99	.01
42–46	25	Mycoses	7	.08					.22	.00
49–57	28–34	Tuberculosis, all	292	3.35	182	2.07	41	.47	154.66	1.77
49–51	28	Tuberculosis of lungs	260	2.98	170	1.93	23	.26	145.43	1.67
52	29	Miliary tuberculosis, acute	4	.05			8	.09	.96	.01
53–57	30–34	Tuberculosis of other organs	28	.31	12	.13	10	.11	8.27	.09
58	36	Scoliosis (rickets)	1	.01	1	.01			.45	.01
59–74	37–38	Venereal diseases, all	9,655	110.69	67	.76	5	.06	412.52	4.73
59–64	37	Syphilis	2,007	23.01	43	.49	5	.06	118.35	1.36
65–67	38a	Soft chancre	2,572	29.49					98.70	1.13
68–74	38b	Gonococcus infection	5,076	58.20	24	.27			195.47	2.24
75–79	39–45	Cancer and other malignant tumors	21	.24	2	.02	10	.11	3.93	.05
80	46	Benign tumors	116	1.33	1	.01			4.40	.05
81–85	47–48	Rheumatism, articular, all	495	5.67	7	.08			34.58	.39
81–82	47	Acute articular rheumatism	406	4.65	4	.05			23.72	.27
83–85	48	Chronic articular rheumatism	89	1.02	3	.03			10.85	.12
87 88	50	Diabetes	9	.10	3	.03			1.00	.01
89	51	Exophthalmic goitre	19	.22	10	.11			3.85	.04
97–100	56	Alcoholism and results	1,303	14.94	16	.18	8	.09	19.47	.22
103–104	59	Other chronic poisoning, including drug habit	35	.40	3	.03			1.08	.01
105–106	60	Encephalitis	4	.05			4	.05	.14	.00
107	61	Simple meningitis	7	.08			3	.03	.61	.01
108	61a	Epidemic cerebrospinal meningitis	17	.19	5	.06	6	.07	1.86	.02
109	62	Locomotor ataxia	6	.07	2	.02			1.07	.01
110–115	63	Other diseases of spinal cord	7	.08	3	.03			1.20	.01
116	64	Cerebral hemorrhage, apoplexy	3	.03	1	.01	1	.01	.24	.00
117–119	66	Paralysis without specified cause	24	.27	1	.01			2.92	.03
120–126	67–68	Mental alienation	365	4.18	259	2.94	3	.03	82.30	.94
127	69	Epilepsy	108	1.24	56	.64	2	.02	10.25	.12
129–133	73	Neuralgia and neuritis	408	4.68	24	.27			19.82	.23
138–141	75a	Follicular conjunctivitis	343	3.93					6.50	.07
142	75b	Trachoma	12	.14	3	.03			1.46	.02
166	77	Pericarditis	5	.06			1	.01	.35	.00
167	78	Acute endocarditis	8	.09			1	.01	1.01	.01
169–174	79	Organic heart disease	125	1.43	47	.53	15	.17	13.56	.16
175	80	Angina pectoris	5	.06	1	.01			.37	.00
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc	22	.25	4	.05	7	.08	1.56	.02

ith ratios per 1,000 of mean strength, for the Army, American troops, enlisted men ar 1914.

Army, American troops, white.								Army, American troops, colored.							
S. G. O., 81,750—A. G. O., 82,655.								S. G. O., 5,478—A. G. O., 5,478.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
7	0.09			3	0.04	1.16	0.01								
7	.09					.91	.01	2	0.37					0.15	0.03
1	.01					.15	.00								
1,689	20.66			1	.01	46.40	.57	62	11.32					1.24	.23
458	5.60			1	.01	17.07	.21	14	2.56					.29	.05
9	.11					2.08	.03								
16	.20					.51	.01	1	.18					.02	.00
1,062	12.99					23.03	.28	32	5.84					.67	.12
144	1.76					3.72	.05	15	2.74					.26	.05
7	.09			1	.01	.21	.00								
592	7.24					6.58	.08	4	.73					.02	.00
540	6.60	1	0.01	8	.10	27.26	.33	10	1.83					.45	.08
29	.35			1	.01	2.30	.03								
44	.54					3.44	.04								
1,006	12.30					16.92	.21	66	12.05					1.07	.19
						.05	.00								
2	.02					.02	.00								
255	3.12	2	.02	4	.05	17.02	.21	35	6.39					1.19	.22
46	.56			1	.01	2.67	.03	1	.18					.10	.02
156	1.91	2	.02	3	.04	12.92	.16	25	4.56					.94	.17
53	.65					1.44	.02	9	1.64					.15	.03
39	.48			1	.01	1.73	.02	1	.18					.05	.01
344	4.21					5.75	.07	54	9.86					.83	.15
75	.92					2.04	.03								
1	.01					.01	.00								
761	9.31					32.51	.40	15	2.74					.41	.07
7	.09			6	.07	.96	.01	2	.37			3	0.55	.02	.00
5	.06					.13	.00	2	.37					.09	.02
261	3.19	166	2.01	37	.45	138.11	1.69	31	5.66	16	2.92	4	.73	16.55	3.02
232	2.84	155	1.88	21	.25	130.43	1.60	28	5.11	15	2.74	2	.37	15.00	2.74
4	.05			7	.08	.26	.00					1	.18	.70	.13
25	.30	11	.12	9	.11	7.42	.09	3	.55	1	.18	1	.18	.84	.16
1	.01	1	.01			.45	.00								
8,950	109.48	56	.68	4	.05	370.33	4.53	705	128.70	11	2.01	1	.18	42.18	7.70
1,853	22.67	33	.40	4	.05	102.86	1.26	154	28.11	10	1.82	1	.18	15.49	2.83
2,351	28.76					87.69	1.07	221	40.35					11.01	2.01
4,746	58.05	23	.28			179.79	2.20	330	60.25	1	.18			15.68	2.86
21	.26	2	.05	10	.12	3.93	.05								
108	1.32					3.72	.05	8	1.46	1	.18			.68	.12
466	5.70	7	.09			32.97	.41	29	5.29					1.61	.30
382	4.67	4	.05			22.54	.28	24	4.38					1.18	.22
84	1.03	3	.04			10.42	.13	5	.91					.43	.08
9	.11	3	.04			1.00	.01								
18	.22	10	.12			3.75	.05	1	.18					.10	.02
1,274	15.58	16	.19	7	.08	18.87	.23	29	5.29			1	.18	.61	.11
33	.40	3	.04			1.05	.01	2	.37					.03	.01
4	.05			4	.05	.14	.00								
7	.09			3	.04	.61	.01								
17	.21	5	.06	6	.07	1.86	.02								
6	.07	2	.02			1.07	.01								
7	.09	3	.04			1.20	.01								
3	.04	1	.01	1	.01	.24	.00								
23	.28	1	.01			2.84	.03	1	.18					.08	.01
342	4.18	244	2.95	3	.04	75.90	.93	23	4.20	15	2.74			6.41	1.17
104	1.27	53	.64	2	.02	9.42	.12	4	.73	3	.55			.83	.15
391	4.78	20	.24			18.38	.22	17	3.10	4	.73			1.44	.26
317	3.88					5.59	.07	26	4.75					.91	.17
12	.15	3	.04			1.46	.02								
4	.05			1	.01	.28	.00	1	.18					.07	.01
8	.10			1	.01	1.01	.01								
99	1.21	43	.52	10	.12	10.97	.13	26	4.75	4	.73	5	.91	2.59	.47
5	.06	1	.01			.37	.00								
18	.22	3	.04	5	.06	1.19	.01	4	.73	1	.18	2	.37	.37	.07

TABLE No. 70.—*Admissions to sick report, discharges, deaths, and noneffectiveness, white and colored.*

Serial Nos.	International classification.	Causes of admission to sick report.	Army, American troops, white and colored.							
		Mean strength	S. G. O., 87,228—A. G. O., 88,133.							
			Admissions.		Discharges.		Deaths.		Noneffective.	
			Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
178–179	82	Embolism and thrombosis	3	0.03			2	0.02	0.25	0.00
181	83b	Hemorrhoids	576	6.60	1	0.01			15.68	.18
183	83d	Varicose veins	58	.66	1	.01			4.48	.05
184	83e	Varicocele	213	2.44					10.96	.13
185–187	84	Diseases of the lymphatic system	548	6.28					31.89	.37
193–199	86	Diseases of the nasal fossæ	897	10.28	2	.02			12.48	.14
200–202	87	Diseases of the larynx	221	2.53			1	.01	3.69	.04
203–204	88	Diseases of the thyroid body	16	.18	1	.01	1	.01	1.27	.01
205–206	89–90	Bronchitis	2,951	33.83	6	.07			56.00	.64
207	91	Bronchopneumonia	47	.54			3	.03	4.06	.05
208	92	Pneumonia	196	2.25	1	.01	15	.17	15.44	.18
209–215	93	Pleurisy	233	2.67	5	.06			13.97	.16
216–217	94	Pulmonary congestion and pulmonary apoplexy	17	.19			1	.01	.38	.00
219	96	Asthma	120	1.36	15	.17			9.92	.11
220	97	Pulmonary emphysema	2	.02					.22	.00
221	98a	Hæmoptysis	8	.09					.29	.00
222	98b	Hay fever	3	.03					.04	.00
224–227	99a	Diseases of the teeth and gums	405	4.64	2	.02			6.78	.08
228–231	99b	Other diseases of the mouth and annexa	68	.78					1.32	.02
232–236	100	Diseases of the pharynx	4,968	56.96			1	.01	70.28	.81
238	102	Ulcer of stomach	30	.34	1	.01	3	.03	4.66	.05
239–244	103	Other diseases of stomach (cancer excepted)	843	9.66	1	.01	2	.02	15.26	.18
245–253	105	Diarrhea and enteritis	2,738	31.39	4	.05	3	.03	36.40	.42
254	106	Ankylostomiasis	49	.56					1.59	.02
255–259	107	Intestinal parasites	95	1.09					1.93	.02
260	108	Appendicitis	704	8.07	5	.06	13	.15	51.48	.59
261–263	109	Hernia	373	4.28	11	.12	3	.03	38.05	.44
264–267	110a	Diseases of the anus and fecal fistula	70	.80					4.75	.05
268–272	110b	Other diseases of the intestines	1,933	22.16	8	.09			27.77	.32
275	113	Cirrhosis of liver	4	.05			1	.01	.79	.01
276	114	Biliary calculi	12	.14					.46	.01
277–281	115	Other diseases of liver and gall bladder	281	3.22			2	.02	12.28	.14
283–284	117	Simple peritonitis	3	.03			1	.01	.25	.00
288	119	Acute nephritis	25	.29			3	.03	1.52	.02
289–291	120	Bright's disease	57	.65	19	.22	9	.10	10.95	.13
293–299	122	Other diseases of the kidney and annexa	22	.25	3	.03	1	.01	1.77	.02
303–306	124	Diseases of the bladder	151	1.73	26	.30			8.63	.10
304	124b	Enuresis	74	.89	24	.27			4.82	.06
307–309	125	Diseases of the urethra, urinary abscess, etc	118	1.35					3.32	.04
310–312	126	Diseases of the prostate	8	.09					.47	.01
313–319	127	Diseases of the male genital organs (nonvenereal)	326	3.74	1	.01			10.36	.12
322–323	143	Furuncle and carbuncle	1,320	15.13					21.52	.24
324–325	144	Acute abscess and cellulitis	983	11.26	1	.01			28.19	.32
352–357	146	Diseases of the bones	172	1.97	7	.08			13.04	.15
358–360	147	Diseases of the joints	313	3.59	19	.22			20.95	.24
367	149e	Flat foot	142	1.63	78	.89			14.46	.17
372	150	Congenital malformations	266	3.08	4	.05			8.79	.10
373–374	154	Senility			1	.01				
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	186	2.13					4.12	.05
379	189Ba	Under observation, undiagnosed and unknown	81	.93			3	.03	2.88	.03
380	189Bb	Malingering	33	.38					1.79	.02

ith ratios per 1,000 of mean strength, for the Army, American troops, enlisted men, ear 1914—Continued.

Army, American troops, white. S. G. O., 81,750—A. G. O., 82,655.								Army, American troops, colored. S. G. O., 5,478—A. G. O., 5,478.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
3	0.04			2	0.02	0.25	0.00								
510	6.24					13.71	.17	66	12.05	1	0.18			1.98	0.36
57	.70	1	0.01			4.47	.05	1	.18					.01	.00
206	2.52					10.52	.13	7	1.28					.44	.08
515	6.30					30.27	.37	33	6.02					1.62	.30
866	10.59	2	.02			12.02	.15	31	5.66					.46	.08
218	2.67			1	.01	3.65	.04	3	.55					.03	.01
15	.18	1	.01	1	.01	1.17	.01	1	.18					.10	.02
2,770	33.88	6	.07			53.01	.65	181	33.04					2.99	.55
44	.54			3	.04	3.53	.04	3	.55					.54	.10
185	2.26	1	.01	13	.16	14.89	.18	11	2.01			2	0.37	.55	.10
223	2.73	4	.05			13.30	.16	10	1.83	1	.18			.67	.12
17	.21			1	.01	.38	.00								
113	1.38	15	.18			9.38	.11	7	1.28					.54	.10
2	.02					.22	.00								
8	.10					.29	.00								
3	.04					.04	.00								
383	4.68	1	.01			6.39	.08	22	4.02	1	.18			.39	.07
64	.78					1.16	.01	4	.73					.16	.03
4,735	57.92			1	.01	67.39	.82	233	42.54					2.88	.53
30	.37	1	.01	3	.04	4.66	.06								
813	9.94	1	.01	2	.02	14.61	.18	30	5.48					.65	.12
2,546	31.14	4	.05	3	.04	34.14	.42	192	35.05					2.25	.41
47	.57					1.52	.02	2	.37					.07	.01
94	1.15					1.88	.02	1	.18					.05	.01
680	8.32	5	.06	12	.15	49.15	.60	24	4.38			1	.18	2.33	.43
357	4.37	11	.13	2	.02	36.62	.45	16	2.92			1	.18	1.43	.26
62	.76					4.37	.05	8	1.46					.38	.07
1,751	21.42	8	.10			25.59	.31	182	32.23					2.18	.40
4	.05			1	.01	.79	.01								
12	.15					.42	.00							.04	.01
271	3.31			2	.02	11.96	.15	10	1.83					.32	.06
3	.04			1	.01	.25	.00								
25	.31			3	.04	1.52	.02								
54	.66	18	.22	9	.11	10.30	.13	3	.55	1	.18			.65	.12
20	.24	3	.01	1	.01	1.69	.02	2	.37					.08	.01
143	1.75	26	.31			8.36	.10	8	1.46					.28	.05
73	.89	24	.29			4.81	.06	1	.18					.01	.00
104	1.27					3.01	.04	14	2.56					.30	.06
7	.09					.43	.00	1	.18					.04	.01
301	3.68	1	.01			9.34	.11	25	4.56					1.01	.19
1,265	15.47					20.74	.25	55	10.05					.78	.14
946	11.57	1	.01			27.00	.33	37	6.75					1.19	.22
157	1.92	7	.08			11.15	.14	15	2.74					1.89	.35
290	3.55	19	.23			19.19	.23	23	4.20					1.76	.32
137	1.68	75	.91			13.55	.17	5	.91	3	.55			.92	.17
227	2.78	4	.05			7.68	.09	42	7.67					1.11	.20
		1	.01												
168	2.05					3.79	.05	18	3.29					.32	.06
71	.87			3	.04	2.61	.03	10	1.83					.28	.05
26	.32					1.14	.01	7	1.28					.65	.12

TABLE NO. 70.—*Admissions to sick report, discharges, deaths, and noneffectiveness, white and colored,*

Serial Nos.	International classification.	Causes of admission to sick report.	Army, American troops, white and colored. S. G. O., 87,228—A. G. O., 88,133. Admissions. Number.	Admissions. Ratio.	Discharges. Number.	Discharges. Ratio.	Deaths. Number.	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[1]								
426–434	155–163	Suicides, all	15	0.17			44	0.50		
435	164	Poisoning by food	189	2.17			3	.03		
436	165a	Venomous bites and stings	93	1.07						
437	165b	Other poisoning (deleterious gases excepted)	63	.72			12	.14		
439	167	Burns (conflagrations excepted)	327	3.75	3	0.03				
440	168	Absorption of deleterious gases	6	.07			1	.01		
441	168a	Suffocation, strangulation	2	.02						
442	169	Drowning, accidental					49	.56		
443	170	Traumatism by firearms (other than specified)	225	2.58	26	.30	14	.16		
444	170a	Shot by sentry or guard	4	.05						
445	171	Traumatism by cutting or piercing instruments	860	9.86	7	.08				
446	172	Traumatism by fall	3,191	36.58	21	.24	7	.08		
447	173	Traumatism in mines and quarries	5	.06						
448	174	Traumatism by machines	76	.87	1	.01				
449	175	Traumatism by other crushing	766	8.78	29	.33	16	.18		
450	176	Injuries by animals	1,065	12.21	6	.07	2	.02		
452	178	Effects of excessive cold	54	.62			3	.03		
453	179	Effects of heat	143	1.64			1	.01		
454	180	Effects of lightning	1	.01						
455	181	Effects of electricity	3	.03						
456–458	182–4	Homicides, all	15	.17			25	.28		
460	186	Other external violence	3,799	43.55	23	.26	7	.08		
462–466		Killed or wounded in action			1	.01				
462		By bullet			1	.01				
		DISEASES AND INJURIES GROUPED.								
		General diseases	18,056	207.00	298	3.38	93	1.06	814.84	9.34
	1–19	Epidemic diseases	6,060	69.47	3	.03	19	.22	174.46	2.00
	20–59	Other general diseases	11,996	137.52	295	3.35	74	.84	640.38	7.34
		Diseases of the nervous system and organs of special sense	2,474	28.37	405	4.60	20	.23	181.31	2.08
	60–74	Of the nervous system	1,187	13.61	373	4.23	20	.23	136.13	1.56
	75	Of the eye and its annexa	757	8.68	19	.22			27.50	.32
	76	Of the ear and its annexa	530	6.08	13	.15			17.68	.20
	77–85	Diseases of the circulatory system	1,672	19.17	61	.69	26	.30	85.89	.99
	86–98	Diseases of the respiratory system	4,726	54.18	30	.34	21	.24	117.98	1.35
	99–118	Diseases of the digestive system	12,591	144.35	33	.37	32	.36	276.38	3.17
	119–127	Diseases of the genito-urinary system	741	8.49	50	.57	13	.15	39.02	.45
	142–145	Diseases of the skin and cellular tissue	4,230	48.49	10	.11			104.28	1.20
	146–149	Diseases of the organs of locomotion	1,873	21.47	112	1.27			81.67	.94
	150	Malformations, etc	269	3.08	4	.05			8.79	.10
	154	Diseases, results of old age			1	.01				
	189	Ill-defined diseases	424	4.86			3	.03	10.34	.12
		Total for disease	47,056	539.46	1,004	11.39	208	2.36	1,720.48	19.72
	155–186	External causes	11,023	126.37	141	1.60	184	2.09	375.09	4.30
		Total for disease and external causes	58,079	665.83	1,145	12.99	392	4.45	2,095.57	24.02

[1] Noneffectiveness for individual external causes not tabulated.

th ratios per 1,000 of mean strength, for the Army, American troops, enlisted men ar 1914—Continued.

Army, American troops, white.								Army, American troops, colored.							
S. G. O., 81,750—A. G. O., 82,655.								S. G. O., 5,478—A. G. O., 5,478.							
Admissions.		Discharges.		Deaths.		Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
15	0.18			44	0.53										
181	2.21			3	.04			8	1.46						
86	1.05							7	1.28						
62	.76			11	.13			1	.18			1	0.18		
318	3.89	3	0.04					9	1.64						
6	.07			1	.01										
2	.02														
				46	.56							3	.55		
179	2.19	23	0.28	13	.16			46	8.40	3	0.55	1	.18		
3	.04							1	.18						
804	9.83	7	.08					56	10.22						
2,992	36.60	21	.25	7	.08			199	36.33						
5	.06														
71	.87	1	.01					5	.91						
740	9.05	27	.33	16	.19			26	4.75	2	.37				
979	11.97	6	.07	2	.02			86	15.70						
53	.65			3	.04			1	.18						
140	1.71			1	.01			3	.55						
1	.01														
3	.04														
11	.13			21	.25			4	.73			4	.73		
3,562	43.57	21	.25	7	.08			237	43.27	2	.37				
		1	.01												
		1	.01												
16,979	207.69	269	3.25	84	1.02	747.16	9.14	1,077	196.61	29	5.29	9	1.64	67.67	12.35
5,794	70.87	3	.04	19	.23	168.91	2.07	266	48.56					5.55	1.01
11,185	136.82	266	3.22	65	.79	578.25	7.07	811	148.05	29	5.29	9	1.64	62.13	11.34
2,359	28.86	378	4.58	20	.25	168.63	2.06	115	21.00	27	4.93			12.68	2.32
1,133	13.86	349	4.22	20	.24	126.02	1.54	54	9.86	24	4.38			10.11	1.85
707	8.65	17	.21			25.28	.31	50	9.13	2	.37			2.22	.41
519	6.35	12	.15			17.33	.21	11	2.01	1	.18			.35	.06
1,532	18.74	55	.67	19	.23	78.65	.96	140	25.56	6	1.10	7	1.28	7.23	1.32
4,478	54.78	29	.35	19	.23	112.09	1.37	248	45.27	1	.18	2	.37	5.89	1.08
11,867	145.16	32	.39	30	.36	263.25	3.22	724	132.17	1	.18	2	.37	13.12	2.40
685	8.38	49	.59	13	.16	36.62	.45	56	10.22	1	.18			2.39	.44
4,031	49.31	9	.11			99.07	1.21	199	36.33	1	.18			5.21	.95
1,733	21.20	109	1.32			74.49	.91	140	25.56	3	.55			7.18	1.31
227	2.78	4	.05			7.68	.09	42	7.67					1.11	.20
		1	.01												
379	4.64			3	.04	8.95	.11	45	8.22					1.39	.25
44,270	541.53	935	11.31	188	2.27	1,596.60	19.53	2,786	508.58	69	12.60	20	3.65	123.88	22.61
10,322	126.26	131	1.58	175	2.12	350.10	4.28	701	127.97	10	1.83	9	1.64	24.99	4.56
54,592	667.79	1,066	12.90	363	4.39	1,946.70	23.81	3,487	636.55	79	14.42	29	5.29	148.87	27.17

TABLE No. 70½.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with officers and total American*

Serial Nos.	International classification.	Causes of admission to sick report.	Officers, United States.									
		Mean strength	S. G. O., 2,995—A. G. O., 3,391.									
			Admissions.		Discharges.		Deaths.			Noneffective.		
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
1	1	Typhoid fever										
2	1a	Paratyphoid fever										
7–11	4	Malaria	29	9.68							1.12	0.37
7		Estivo-autumnal fever	6	2.00							.23	.08
8		Malarial cachexia	2	.67							.34	.11
9		Quartan malarial fever										
10		Tertian malarial fever	17	5.68							.50	.17
11		Undetermined malarial fever	4	1.34							.05	.02
12	5	Smallpox and varioloid										
13	5b	Vaccinia	1	.33							.01	.00
14	6	Measles	4	1.34							.18	.06
15	7	Scarlet fever										
17	9	Diphtheria	1	.33							.05	.02
18	10	Influenza	99	33.06							1.61	.54
20	13	Cholera nostras										
21–23	14	Dysentery	8	2.67							.87	.29
21		Bacillary										
22		Entamebic	4	1.34							.73	.24
23		Unclassified	4	1.34							.14	.05
27	18	Erysipelas	2	.67							.05	.02
29	19b	Dengue									.01	.00
31	19d	German measles	2	.67							.05	.02
34	19g	Mumps	3	1.00							.07	.02
37	20	Purulent infection and septicemia										
42–46	25	Mycoses	1	.33							.55	.18
49–57	28–34	Tuberculosis, all	10	3.34				4	3	0.88	7.28	2.43
49–51	28	Tuberculosis of lungs	9	3.01				4	3	.88	7.18	2.40
52	29	Miliary tuberculosis, acute										
53–57	30–34	Tuberculosis of other organs	1	.33							.09	.03
58	36	Scoliosis (rickets)										
59–74	37–38	Venereal diseases, all	11	3.67							.64	.21
59–64	37	Syphilis	6	2.00							.53	.18
65–67	38a	Soft chancre	1	.33								
68–74	38b	Gonococcus infection	4	1.34							.11	.04
75–79	39–45	Cancer and other malignant tumors	4	1.34				4	4	1.18	1.22	.41
80	46	Benign tumors	2	.67							.21	.07
81–85	47–48	Rheumatism, articular, all	15	5.01							1.27	.42
81–82	47	Acute articular rheumatism	10	3.34							.72	.24
83–85	48	Chronic articular rheumatism	5	1.67							.55	.18
87–88	50	Diabetes	2	.67							.35	.12
89	51	Exophthalmic goitre	1	.33							.11	.04
97–100	56	Alcoholism and results	11	3.67							.26	.09
103–104	59	Other chronic poisoning, including drug habit										
105–106	60	Encephalitis										
107	61	Simple meningitis										
108	61a	Epidemic cerebrospinal meningitis										
109	62	Locomotor ataxia	1	.33							.37	.12
110–115	63	Other diseases of spinal cord										
116	64	Cerebral hemorrhage, apoplexy	1	.33				1	1	.29	.05	.02
117–119	66	Paralysis without specified cause										
120–126	67–68	Mental alienation	3	1.00							1.28	.43
127	69	Epilepsy	4	1.34							.46	.15
129–133	73	Neuralgia and neuritis	22	7.35							1.94	.65
138–141	75a	Follicular conjunctivitis	5	1.67							.07	.03
142	75b	Trachoma	1	.33							.17	.06
166	77	Pericarditis										
167	78	Acute endocarditis	2	.67				1	1	.29	.90	.08
169–174	79	Organic heart disease	7	2.34							1.62	.55
175	80	Angina pectoris										

[1] Including those occurring in the United States proper from commands on duty in Alaska or insular possessions.

atios per 1,000 of mean strength, for the United States, continental, excluding Alaska roops for the year 1914.

Enlisted men, United States. S. G. O., 61,362—A. G. O., 61,867.										Total, United States. S. G. O., 64,357—A. G. O., 65,258.									
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
		Number.			Number.							Number.			Number.				
Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.	Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.
7	0.11				3	3	0.05	1.14	0.02	7	0.11				3	3	0.05	1.14	0.02
7	.11							.66	.01	7	.11							.66	.01
662	10.79							14.61	.24	691	10.74							15.73	.24
40	.65							1.45	.02	46	.71							1.68	.03
3	.05							1.38	.02	5	.08							1.72	.03
7	.11							.14	.00	7	.11							.14	.00
573	9.34							10.72	.17	590	9.17							11.22	.17
39	.64							.92	.01	43	.67							.97	.01
7	.11				1	1	.02	.76	.00	7	.11				1	1	.02	.21	.00
593	9.66							6.58	.11	594	9.23							6.59	.10
448	7.30	1	1	0.02	8	8	.13	21.93	.36	452	7.02	1	1	0.02	8	8	.12	22.11	.34
28	.46				1	1	.02	2.26	.04	28	.44				1	1	.02	2.26	.04
37	.60							2.40	.04	38	.59							2.45	.04
723	11.78							11.19	.18	822	12.77							12.80	.20
2	.03							.02	.00	2	.03							.02	.00
92	1.50	2	2	.03	2	2	.03	6.82	.11	100	1.55	2	2	.03	2	2	.03	7.69	.12
2	.03							.21	.00	2	.03							.21	.00
55	.90	2	2	.03	2	2	.03	5.83	.10	59	.92	2	2	.03	2	2	.03	6.56	.10
35	.57							.78	.01	39	.61							.92	.01
33	.54				1	1	.02	1.52	.02	35	.54				1	1	.02	1.57	.02
50	.81							.81	.01	50	.78							.82	.01
68	1.11							1.83	.03	70	1.09							1.88	.03
547	8.91							23.19	.38	550	8.55							23.26	.36
7	.11				6	6	.10	.96	.02	7	.11				6	6	.09	.96	.01
4	.05							.09	.00	5	.08							.64	.01
165	2.69	182	130	2.10	38	29	.47	136.71	2.23	175	2.72	182	130	2.10	42	32	.49	143.99	2.24
144	2.35	170	122	1.97	21	15	.24	129.65	2.11	153	2.38	170	122	1.97	25	18	.28	136.83	2.13
3	.05				7	6	.10	.87	.01	3	.05				7	6	.09	.87	.01
18	.30	12	8	.13	10	8	.07	6.20	.10	19	.31	12	8	.13	10	8	.13	6.29	.10
		1						.19	.00			1						.19	.00
5,513	89.84	67	54	.87	4	3	.05	229.82	3.75	5,524	85.84	67	54	.87	4	3	.05	230.46	3.58
1,137	18.53	43	34	.55	4	3		70.30	1.15	1,143	17.76	43	34	.55	4	3	.05	70.83	1.10
1,225	19.96							49.24	.80	1,226	19.05							49.24	.77
3,151	51.35	24	20	.32				110.27	1.80	3,155	49.03	24	19	.31				110.33	1.72
15	.24	2	2	.03	9	6	.10	3.03	.05	19	.30	2	2	.03	13	10	.15	4.25	.07
75	1.22	1	1	.02				2.59	.04	77	1.20	1	1	.02				2.80	.04
409	6.67	7	7	.12				29.16	.48	424	6.59	7	7	.11				30.43	.46
349	5.69	4	4	.07				21.32	.35	359	5.58	4	4	.07				22.04	.34
60	.98	3	3	.05				7.83	.12	65	1.01	3	3	.05				8.38	.13
9	.15	3	3	.05				1.00	.01	11	.17	3	3	.05				1.35	.02
13	.21	10	10	.16				3.36	.05	14	.22	10	10	.16				3.47	.05
826	13.46	16	12	.19	4	3	.05	12.61	.21	837	13.01	16	12	.19	4	3	.05	12.87	.20
23	.37	3	3	.05				.75	.01	23	.36	3	3	.05				.75	.01
3	.05				3	3	.05	.12	.00	3	.05				3	3	.05	.12	.00
7	.11				3	3	.05	.61	.01	7	.11				3	3	.05	.61	.01
14	.23	5	3	.05	5	5	.08	1.59	.03	14	.22	5	3	.05	5	5	.08	1.59	.02
6	.10	2	2	.03				1.07	.02	7	.11	2	2	.03				1.44	.02
5	.07	3	2	.03				.96	.02	5	.08	3	2	.03				.96	.02
2	.03	1	1	.02	1	1	.02	.12	.00	3	.05	1	1	.02	2	2	.03	.17	.00
20	.33	1	1	.02				2.75	.04	20	.31	1	1	.02				2.75	.04
235	3.83	259	187	3.02	2	2	.03	65.13	1.06	238	3.70	259	187	3.02	2	2	.04	66.41	1.03
79	1.29	56	52	.84	2	2	.03	7.75	.13	83	1.29	56	52	.84	2	2	.03	8.21	.13
304	4.96	24	15	.25				15.74	.25	326	5.07	24	15	.25				17.68	.27
245	3.99							4.65	.07	250	3.88							4.72	.07
6	.10	3	1	.02				.84	.01	7	.11	3	1	.02				1.01	.02
2	.03				1	1	.01	.24	.00	2	.03				1	1	.02	.24	.00
6	.10							.99	.02	8	.12				1	1	.02	1.23	.02
78	1.27	47	41	.66	13	13	.21	9.50	.15	85	1.32	47	41	.66	13	13	.21	11.12	.17
4	.07	1	1	.02				.36	.01	4	.06	1	1	.02				.36	.01

[2] Excluding those occurring in the United States **proper** from commands on duty in Alaska or insular possessions.

TABLE No. 70½.—*Admissions to sick report, discharges, deaths, and noneffectiveness, o officers and total American tro*

Serial Nos.	International classification.	Causes of admission to sick report.	Officers, United States.									
		Mean strength	S. G. O., 2,995—A. G. O., 3,391.									
			Admissions.		Discharges.			Deaths.			Noneffecti	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc	4	1.34							1.47	C
178–179	82	Embolism and thrombosis	1	.33							.08	
181	83b	Hemorrhoids	28	9.35							.94	
183	83d	Varicose veins	1	.33							.01	
184	83e	Varicocele	1	.33							.06	
185–187	84	Diseases of the lymphatic system	3	1.00							.05	
193–199	86	Diseases of the nasal fossæ	81	27.04							1.43	
200–202	87	Diseases of the larynx	18	6.01							.30	
203–204	88	Diseases of the thyroid body										
205–206	89–90	Bronchitis	113	37.73							1.84	
207	91	Bronchopneumonia	2	.67							.22	
208	92	Pneumonia	3	1.00							.32	
209–215	93	Pleurisy	6	2.00							1.22	
216–217	94	Pulmonary congestion and pulmonary apoplexy										
219	96	Asthma	5	1.67							.15	
220	97	Pulmonary emphysema										
221	98a	Hæmoptysis										
222	98b	Hay fever										
224–227	99a	Diseases of the teeth and gums	19	6.34							.18	
228–231	99b	Other diseases of the mouth and annexa	3	1.00							.02	
232–236	100	Diseases of the pharynx	132	44.07							2.21	
238	102	Ulcer of stomach	7	2.34							1.45	
239–244	103	Other diseases of stomach (cancer excepted)	53	17.69				1	1	0.29	.46	
245–253	105	Diarrhea and enteritis	103	34.39							1.93	
254	106	Ankylostomiasis										
255–259	107	Intestinal parasites	2	.67							.08	
260	108	Appendicitis	19	6.34							1.43	
261–263	109	Hernia	8	2.67							.90	
264–267	110a	Diseases of the anus and fecal fistula	5	1.67							.28	
268–272	110b	Other diseases of the intestines	34	11.35							.75	
275	113	Cirrhosis of liver	1	.33							.06	
276	114	Biliary calculi	1	.33							.02	
277–281	115	Other diseases of liver and gall bladder	6	2.00							.16	
283–284	117	Simple peritonitis										
288	119	Acute nephritis	2	.67							.09	
289–291	120	Bright's disease	8	2.68							.80	
293–299	122	Other diseases of the kidney and annexa	1	.33							.68	
303–306	124	Diseases of the bladder	2	.67							.08	
304	124b	Enuresis										
307–309	125	Diseases of the urethra, urinary abscess, etc	1	.33							.60	
310–312	126	Diseases of the prostate										
313–319	127	Diseases of the male genital organs (nonvenereal)	3	1.00							.06	
322–323	143	Furuncle and carbuncle	29	9.68							.64	
324–325	144	Acute abscess and cellulitis	19	6.35							.57	
352–357	146	Diseases of the bones	9	3.00							1.35	
358–360	147	Diseases of the joints	8	2.67							1.50	
367	149e	Flat foot	4	1.34							.98	
372	150	Congenital malformations	5	1.67							.11	
373–374	154	Senility										
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	3	1.00							.11	
379	189Ba	Under observation, undiagnosed and unknown	7	2.34							.38	
380	189Bb	Malingering										

[1] Including those occurring in the United States proper from commands on duty in Alaska or insu possessions.

ratios per 1,000 of mean strength, for the United States, continental, excluding Alaska, for the year 1914—Continued.

Enlisted men, United States. S. G. O., 61,362—A. G. O., 61,867.										Total, United States. S. G. O., 64,357—A. G. O., 65,258.									
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.	Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
11	0.18	4	3	0.05	3	3	0.05	1.17	0.02	15	0.23	4	3	0.05	3	3	0.05	2.64	0.04
1	.02				2	2	.03	.13	.00	2	.03				2	2	.03	.21	.00
394	6.42	1	1	.02				10.41	.17	422	6.56	1	1	.02				11.35	.18
38	.62	1	1	.02				2.99	.05	39	.61	1	1	.02				3.00	.05
130	2.12							6.17	.10	131	2.04							6.23	.10
314	5.12							19.72	.32	317	4.93							19.77	.30
596	9.71	2	1	.02				7.75	.13	677	10.52	2	1	.02				9.18	.14
186	3.03				1	1	.02	3.21	.05	204	3.17				1	1	.02	3.51	.05
10	.17	1	1	.02	1	1	.02	1.03	.02	10	.16	1	1	.02	1	1	.02	1.03	.02
2,170	35.36	6	5	.08				38.00	.62	2,283	35.48	6	5	.08				39.84	.62
31	.51				1	1	.02	2.67	.04	33	.51				1	1	.02	2.89	.04
162	2.64	1	1	.02	15	15	.24	12.85	.21	165	2.56	1	1	.02	15	15	.23	13.17	.20
159	2.59	5	3	.05				10.45	.16	165	2.56	5	3	.05				11.67	.18
5	.08				1	1	.02	.08	.00	5	.08				1	1	.02	.08	.00
82	1.34	15	12	.19				7.98	.13	87	1.35	15	12	.19				8.13	.13
								.11	.00									.11	.00
7	.11							.26	.00	7	.11							.26	.00
2	.03							.02	.00	2	.03							.02	.00
281	4.58	2						4.37	.07	300	4.66	2						4.55	.07
55	.90							1.02	.02	58	.90							1.04	.02
4,015	65.43				1	1	.02	55.37	.90	4,147	64.44				1	1	.02	57.58	.89
18	.29	1	1	.02	3	3	.05	3.20	.05	25	.39	1	1	.02	3	3	.05	4.65	.07
518	8.44	1	1	.02	2	2	.03	8.51	.14	571	8.87	1	1	.02	3	3	.05	8.97	.14
1,568	25.55	4	2	.03	3	3	.05	19.58	.32	1,671	25.97	4	2	.03	3	3	.05	21.51	.33
42	.68							1.27	.02	42	.65							1.27	.02
51	.83							.65	.01	53	.82							.73	.01
439	7.15	5	4	.06	9	9	.15	33.11	.54	458	7.12	5	4	.06	9	9	.14	34.54	.54
279	4.54	11	9	.15	3	3	.05	27.77	.45	287	4.46	11	9	.15	3	3	.05	28.67	.44
49	.81							3.29	.05	54	.85							3.57	.05
1,214	19.78	8	7	.11				18.18	.30	1,248	19.39	8	7	.11				18.93	.29
3	.05				1	1	.02	.68	.01	4	.06				1	1	.02	.74	.01
10	2.16							.29	.00	11	.17							.31	.00
164	2.67				1			6.71	.11	170	2.64				1			6.87	.10
3	.05				1	1	.02	.25	.00	3	.05				1	1	.02	.25	.00
15	.24				3	3	.05	.95	.02	17	.26				3	3	.05	1.04	.02
42	.69	19	13	.21	8	6	.10	8.86	.14	50	.78	19	13	.21	8	6	.10	9.66	.15
16	.26	3	2	.03	1	1	.02	1.27	.02	17	.26	3	2	.03	1	1	.02	1.95	.03
105	1.71	25	23	.38				6.43	.10	107	1.66	25	23	.38				6.51	.10
54	.88	24	22	.36				3.79	.06	54	.84	24	22	.36				3.79	.06
64	1.05							2.29	.04	65	1.01							2.89	.05
7	.12							.43	.01	7	.11							.43	.01
224	3.65	1	1	.02				7.43	.12	227	3.53	1	1	.02				7.49	.11
792	12.90							12.70	.21	821	12.76							13.34	.21
692	11.28	1	1	.02				18.82	.31	711	11.05	1	1	.02				19.39	.30
110	1.80	7	4	.07				8.36	.13	119	1.85	7	4	.07				9.71	.15
226	3.68	19	18	.29				15.71	.26	234	3.64	19	18	.29				17.21	.27
108	1.76	78	72	1.16				11.36	.19	112	1.74	78	72	1.16				12.35	.19
179	2.92	4	4	.06				6.03	.10	184	2.86	4	4	.06				6.14	.10
		1	1	.02								1	1	.02					
93	1.52							1.99	.03	96	1.49							2.10	.03
55	.90				3	3	.05	1.52	.02	62	.96				3	3	.05	1.90	.03
26	.42							1.17	.02	26	.40							1.17	.02

[2] Excluding those occurring in the United States proper from commands on duty in Alaska or insular possessions.

TABLE No. 70½.—*Admissions to sick report, discharges, deaths, and noneffectiveness, wit officers and total American troop*

Serial Nos.	International classification.	Causes of admission to sick report.	Officers, United States.									
		Mean strength	S. G. O., 2,995—A. G. O., 3,391.									
			Admissions.		Discharges.			Deaths.			Noneffective	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[3]										
426–434	155–163	Suicides, all	1	0.33				1	1	0.29		
435	164	Poisoning by food	9	3.01								
436	165a	Venomous bites and stings	3	1.00								
437	165b	Other poisoning (deleterious gases excepted)										
439	167	Burns (conflagrations excepted)	3	1.00								
440	168	Absorption of deleterious gases										
442	169	Drowning, accidental						2	2	.59		
443	170	Traumatism by firearms (other than specified)	6	2.00								
444	170a	Shot by sentry or guard										
445	171	Traumatism by cutting or piercing instruments	14	4.67								
446	172	Traumatism by fall	68	22.70				2	2	.59		
447	173	Traumatism in mines and quarries										
448	174	Traumatism by machines	3	1.00								
449	175	Traumatism by other crushing	14	4.67				2	2	.59		
450	176	Injuries by animals	27	9.02								
452	178	Effects of excessive cold										
453	179	Effects of heat	3	1.00								
454	180	Effects of lightning						1	1	.29		
455	181	Effects of electricity										
456–458	182–4	Homicides, all										
460	186	Other external violence	68	22.70				1	1	.29		
462–466	.....	Killed or wounded in action										
462	.....	By bullet										
		DISEASES AND INJURIES GROUPED.										
	.....	General diseases	211	70.45				8	7	2.06	16.53	5.5
	1–19	Epidemic diseases	153	51.09							4.06	1.3
	20–59	Other general diseases	58	19.37				8	7	2.06	12.47	4.1
	.....	Diseases of the nervous system and organs of special sense	98	32.72				1	1	.29	10.63	3.5
	60–74	Of the nervous system	62	20.70				1	1	.29	7.37	2.4
	75	Of the eye and its annexa	21	7.01							1.75	.5
	76	Of the ear and its annexa	15	5.01							1.51	.5
	77–85	Diseases of the circulatory system	54	18.03				1	1	.29	4.84	1.6
	86–98	Diseases of the respiratory system	228	76.13							5.47	1.8
	99–118	Diseases of the digestive system	395	131.89				2	2	.59	10.13	3.3
	119–127	Diseases of the genito-urinary system	27	9.02							2.56	.8
	142–145	Diseases of the skin and cellular tissue	76	25.37							2.96	.9
	146–149	Diseases of the organs of locomotion	68	22.70							5.78	1.9
	150	Malformations, etc	5	1.67							.12	.0
	154	Diseases, results of old age										
	189	Ill-defined diseases	15	5.01							.53	.1
		Total for disease	1,177	392.99				12	11	3.24	59.56	19.8
	155–186	External causes	223	74.46				9	9	2.65	13.62	4.5
		Total for disease and external causes	1,400	467.45				21	20	5.90	73.18	24.4

[1] Including those occurring in the United States proper from commands on duty in Alaska or insul possessions.

[2] Excluding those occurring in the United States proper from commands on duty in Alaska or insul possessions.

ations per 1,000 of mean strength, for the United States, continental, excluding Alaska, for the year 1914—Continued.

Enlisted men, United States.										Total, United States.									
S. G. O., 61,362—A. G. O., 61,867.										S. G. O., 64,357—A. G. O., 65,258.									
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
		Number.			Number.							Number.			Number.				
Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.	Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.
12	0.20				37	37	0.60			13	0.20				38	38	0.58		
66	1.08				1	1	.02			75	1.17				1	1	.02		
53	.86									56	.87								
53	.86				7	7	.11			53	.82				7	7	.11		
226	3.68	3	3	0.05						229	3.56	3	3	0.05					
6	.10				1	1	.02			6	.09				1	1	.02		
					38	38	.61								40	40	.61		
179	2.92	25	23	.37	12	12	.19			185	2.87	25	23	.37	12	12	.18		
1	.02									1	.02								
612	9.97	7	6	.10						626	9.73	7	6	.10					
2,279	37.14	21	18	.29	5	5	.08			2,347	36.47	21	18	.29	7	7	.11		
5	.08									5	.08								
62	1.01	1	1	.02						65	1.01	1	1	.02					
575	9.37	29	26	.42	12	12	.19			589	9.15	29	26	.42	14	14	.21		
878	14.31	6	6	.10	2	2	.03			905	14.06	6	6	.10	2	2	.03		
50	.81				1	1	.02			50	.78				1	1	.02		
84	1.37				1	1	.02			87	1.35				1	1	.02		
															1	1	.02		
2	.03									2	.03								
13	.21				20	20	.32			13	.20				20	20	.31		
2,800	45.63	23	19	.31	5	5	.08			2,868	44.57	23	19	.31	6	6	.09		
		1	1	.02								1	1	.02					
		1	1	.02								1	1	.02					
10,763	175.40	298	228	3.69	77	63	1.02	521.52	8.50	10,974	170.52	298	228	3.69	85	68	1.04	538.05	8.36
3,695	60.22	3	3	.05	16	16	.26	99.32	1.62	3,848	59.79	3	3	.05	16	16	.25	103.38	1.61
7,068	115.19	295	225	3.64	61	47	.76	422.20	6.88	7,126	110.73	295	225	3.64	69	52	.80	434.67	6.75
1,670	27.21	404	308	4.98	17	17	.27	140.21	2.28	1,768	27.47	404	308	4.98	18	18	.28	150.84	2.34
825	13.44	373	282	4.56	17	17	.27	106.92	1.74	887	13.78	373	282	4.56	18	18	.28	114.29	1.78
538	8.77	19	16	.26				21.07	.34	559	8.69	19	16	.26				22.82	.35
307	5.00	12	10	.16				12.21	.20	322	5.00	12	10	.16				13.72	.21
1,053	17.16	61	54	.87	19	19	.31	56.25	.92	1,107	17.20	61	54	.87	20	20	.31	61.09	.95
3,424	55.80	30	23	.37	19	19	.31	84.63	1.38	3,652	56.75	30	23	.37	19	19	.29	90.10	1.40
8,720	142.11	33	25	.40	27	25	.40	186.38	3.04	9,115	141.63	33	25	.40	29	27	.41	196.51	3.05
498	8.12	49	40	.65	12	10	.16	29.47	.48	525	8.16	49	40	.65	12	10	.15	32.03	.50
2,762	45.01	10	10	.16				68.61	1.12	2,838	44.10	10	10	.16				71.57	1.11
1,342	21.87	112	101	1.63				57.91	.94	1,410	21.91	112	101	1.63				63.69	.99
179	2.92	4	4	.06				6.03	.10	184	2.86	4	4	.06				6.15	.10
		1	1	.02								1	1	.02					
198	3.23				3	3	.05	5.03	.08	213	3.31				3	3	.05	5.56	.09
30,600	498.83	1,002	794	12.83	174	156	2.52	1,156.06	18.84	31,786	493.90	1,002	794	12.83	180	167	2.56	1,215.62	18.89
8,039	131.01	140	123	1.99	142	142	2.30	277.64	4.53	8,262	128.38	140	123	1.99	151	151	2.31	291.26	4.53
38,648	629.84	1,142	917	14.82	316	298	4.82	1,433.72	23.37	40,048	622.28	1,142	917	11.82	337	318	4.87	1,506.90	23.41

[3] Noneffectiveness for individual external causes not tabulated.

TABLE NO. 71.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with continental, excluding*

Serial Nos.	International classification.	Causes of admission to sick report.	United States, total enlisted men, white and colored.									
		Mean strength	S. G. O., 61,362—A. G. O., 61,867.									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
1	1	Typhoid fever	7	0.11				3	3	0.05	1.14	0.02
2	1a	Paratyphoid fever	7	.11							.66	.01
7–11	4	Malaria	662	10.79							14.61	.24
7		Estivo-autumnal fever	40	.65							1.45	.02
8		Malarial cachexia	3	.05							1.38	.02
9		Quartan malarial fever	7	.11							.14	.00
10		Tertian malarial fever	573	9.34							10.72	.17
11		Undetermined malarial fever	39	.64							.92	.01
12	5	Smallpox and varioloid	7	.11				1	1	.02	.21	.00
13	5b	Vaccinia	593	9.66							6.58	.11
4	6	Measles	448	7.30	1	1	0.02	8	8	.13	21.93	.36
15	7	Scarlet fever	28	.46				1	1	.02	2.26	.04
17	9	Diphtheria	37	.60							2.40	.04
18	10	Influenza	723	11.78							11.19	.18
20	13	Cholera nostras	2	.03							.02	.00
21–23	14	Dysentery	92	1.50	2	2	.03	2	2	.03	6.83	.11
21		Bacillary	2	.03							.21	.00
22		Entamebic	55	.90	2	2	.03	2	2	.03	5.83	.10
23		Unclassified	35	.57							.78	.01
27	18	Erysipelas	33	.54				1	1	.02	1.52	.02
29	19b	Dengue	50	.81							.81	.01
31	19d	German measles	68	1.11							1.83	.03
34	19g	Mumps	547	8.91							23.20	.38
37	20	Purulent infection and septicemia	7	.11				6	6	.10	.96	.02
42–46	25	Mycoses	4	.05							.10	.00
49–57	28–34	Tuberculosis, all	165	2.69	182	130	2.10	38	29	.47	136.72	2.23
49–51	28	Tuberculosis of lungs	144	2.35	170	122	1.97	21	15	.24	129.65	2.11
52	29	Miliary tuberculosis, acute	3	.05				7	6	.10	.87	.01
53–57	30–34	Tuberculosis of other organs	18	.30	12	8	.13	10	8	.13	6.19	.10
58	36	Scoliosis (rickets)			1						.19	.00
59–74	37–38	Venereal diseases, all	5,513	89.84	67	54	.87	4	3	.05	229.82	3.75
59–64	37	Syphilis	1,137	18.53	43	34	.55	4	3	.05	70.30	1.15
65–67	38a	Soft chancre	1,225	19.96							49.23	.80
68–74	38b	Gonococcus infection	3,151	51.35	24	20	.32				110.27	1.80
75–79	39–45	Cancer and other malignant tumors	15	.24	2	2	.03	9	6	.10	3.03	.05
80	46	Benign tumors	75	1.22	1	1	.02				2.58	.04
81–85	47–48	Rheumatism, articular, all	409	6.67	7	7	.12				29.15	.46
81–82	47	Acute articular rheumatism	349	5.69	4	4	.07				21.32	.35
83–85	48	Chronic articular rheumatism	60	.98	3	3	.05				7.84	.12
87–88	50	Diabetes	9	.15	3	3	.05				1.00	.01
89	51	Exopthalmic goitre	13	.21	10	10	.16				3.36	.05
97–100	56	Alcoholism and results	826	13.46	16	12	.19	4	3	.05	12.61	.21
103–104	59	Other chronic poisoning, including drug habit	23	.37	3	3	.05				.74	.01
105–106	60	Encephalitis	3	.05				3	3	.05	.12	.00
107	61	Simple meningitis	7	.11				3	3	.05	.61	.01
108	61a	Epidemic cerebrospinal meningitis	14	.23	5	3	.05	5	5	.08	1.59	.03
109	62	Locomotor ataxia	6	.10	2	2	.03				1.07	.02
110–115	63	Other diseases of spinal cord	5	.07	3	2	.03				.96	.02
116	64	Cerebral hemorrhage, apoplexy	2	.03	1	1	.02	1	1	.02	.12	.00
117–119	66	Paralysis without specified cause	20	.33	1	1	.02				2.75	.04
120–126	67–68	Mental alienation	235	3.83	259	187	3.02	2	2	.03	65.13	1.06
127	69	Epilepsy	79	1.29	56	52	.84	2	2	.03	7.75	.13
129–133	73	Neuralgia and neuritis	304	4.96	24	15	.25				15.74	.25
138–141	75a	Conjunctivitis	245	3.99							4.66	.07
142	75b	Trachoma	6	.10	3	1	.02				.84	.01
166	77	Pericarditis	2	.03				1	1	.02	.24	.00
167	78	Acute endocarditis	6	.10							.99	.02
169–174	79	Organic heart disease	78	1.27	47	41	.66	13	13	.21	9.51	.15
175	80	Angina pectoris	4	.07	1	1	.02				.36	.01
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc	11	.18	4	3	.05	3	3	.05	1.18	.02

[1] Including those occurring in the United States proper from commands on duty in Alaska or insul possessions.

tios per 1,000 of mean strength, for enlisted American troops serving in the United States, laska, for the year 1914.

United States, white, enlisted men. S. G. O., 59,534—A. G. O., 60,039.										United States, colored, enlisted men. S. G. O., 1,828—A. G. O., 1,828.									
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
		Number.			Number.							Number.			Number.				
Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.	Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.
7	0.12				3	3	0.05	1.14	0.02										
5	.08							.51	.01	2	1.09							0.15	0.08
658	11.05							14.45	.24	4	2.19							.16	.09
40	.67							1.45	.02										
3	.05							1.38	.02										
7	.12							.14	.00										
569	9.56							10.56	.18	4	2.19							.16	.09
39	.66							.92	.02										
7	.12				1	1	.02	.21	.00										
589	9.89							6.56	.11	4	2.19							.02	.01
448	7.53	1	1	0.02	8	8	.13	21.93	.37										
28	.47				1	1	.02	2.26	.04										
37	.62							2.40	.04										
689	11.57							10.84	.18	34	18.60							.35	.19
2	.03							.02	.00										
84	1.41	2	2	.03	2	2	.03	6.63	.11	8	4.38	2						.20	.11
2	.03							.21	.00										
51	.86	2	2	.03	2	2	.03	5.66	.10	4	2.19	2						.17	.09
31	.52							.75	.01	4	2.19							.03	.02
32	.54				1	1	.02	1.47	.03	1	.55							.05	.03
50	.84							.81	.01										
68	1.14							1.83	.03										
544	9.14							23.12	.39	3	1.64							.08	.04
7	.12				5	5	.08	.96	.02						1	1	0.55		
4	.07							.10	.00										
159	2.67	166	122	2.03	34	28	.47	124.13	2.09	6	3.28	16	8	4.38	4	1	.55	12.59	6.89
138	2.32	155	114	1.90	19	14	.23	118.20	1.98	6	3.28	15	8	4.38	2	1	.55	11.45	6.27
3	.05				6	6	.10	.17	.00						1			.70	.38
18	.30	11	8	.13	9	8	.14	5.76	.10			1			1			.43	.24
		1						.19	.00										
5,417	90.99	56	46	.77	3	3	.05	220.53	3.70	96	52.52	11	8	4.38	1			9.29	5.08
1,123	18.86	33	26	.43	3	3	.05	65.81	1.11	14	7.66	10	8	4.38	1			4.49	2.46
1,196	20.09							47.08	.79	29	15.86							2.15	1.18
3,098	52.04	23	20	.33				107.63	1.81	53	28.99	1						2.64	1.44
15	.25	2	2	.03	9	6	.10	3.03	.05										
74	1.24							2.43	.04	1	.55	1	1	.55				.15	.08
389	6.54	7	7	.12				27.87	.46	20	10.94							1.28	.70
333	5.60	4	4	.07				20.44	.34	16	8.75							.88	.48
56	.94	3	3	.05				7.43	.12	4	2.19							.41	.22
9	.15	3	3	.05				1.00	.01										
13	.22	10	10	.17				3.36	.06										
823	13.82	16	12	.20	4	3	.05	12.44	.21	3	1.64							.17	.09
22	.37	3	3	.05				.73	.01	1	.55							.01	.01
3	.05				3	3	.05	.12	.00										
7	.12				3	3	.05	.61	.01										
14	.24	5	3	.05	5	5	.08	1.59	.03										
6	.10	2	2	.03				1.07	.02										
5	.09	3	2	.03				.96	.02										
2	.03	1	1	.02	1	1	.02	.12	.00										
20	.34	1	1	.02				2.75	.05										
227	3.81	244	179	2.98	2	2	.03	60.48	1.02	8	4.38	15	8	4.38				4.65	2.54
78	1.31	53	49	.82	2	2	.03	7.36	.12	1	.55	3	3	1.64				.39	.22
295	4.96	20	15	.25				14.99	.26	9	4.92	4						.75	.42
236	3.96							4.02	.07	9	4.92							.64	.35
6	.10	3	1	.02				.84	.01										
2	.03				1	1	.02	.24	.00										
6	.10							.99	.02										
67	1.13	43	37	.62	8	8	.13	7.88	.13	11	6.02	4	4	2.19	5	5	2.74	1.63	.89
4	.07	1	1	.02				.36	.01										
11	.19	3	2	.03	3	3	.05	.92	.02			1	1	.55				.26	.14

[1] Excluding those occurring in the United States proper from commands on duty in Alaska or insular possessions.

TABLE No. 71.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with continental, excluding Alaska,*

Serial Nos.	International classification.	Causes of admission to sick report.	United States, total enlisted men, white and colored.									
		Mean strength	S. G. O., 61,362—A. G. O., 61,867.									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
178–179	82	Embolism and thrombosis	1	0.02				2	2	0.03	T. 13	0.00
181	83b	Hemorrhoids	394	6.42	1	1	0.02				10.42	.17
183	83d	Varicose veins	38	.62	1	1	.02				2.99	.05
184	83e	Varicocele	130	2.12							6.17	.10
185–187	84	Diseases of the lymphatic system	314	5.12							19.73	.32
193–199	86	Diseases of the nasal fossæ	596	9.71	2	1	.02				7.76	.13
200–202	87	Diseases of the larynx	186	3.03				1	1	.02	3.21	.05
203–204	88	Diseases of the thyroid body	10	.17	1	1	.02	1	1	.02	1.03	.02
205–206	89–90	Bronchitis	2.170	35.36	6	5	.08				38.00	.62
207	91	Bronchopneumonia	31	.51				1	1	.02	2.67	.04
208	92	Pneumonia	162	2.64	1	1	.02	15	15	.24	12.86	.21
209–215	93	Pleurisy	159	2.59	5	3	.05				10.45	.16
216–217	94	Pulmonary congestion and pulmonary apoplexy	5	.08				1	1	.02	.08	.00
219	96	Asthma	82	1.34	15	12	.19				7.98	.13
220	97	Pulmonary emphysema									.11	.00
221	98a	Hæmoptysis	7	.11							.26	.00
222	98b	Hay fever	2	.03							.02	.00
224–227	99a	Diseases of the teeth and gums	281	4.58	2						4.37	.07
228–231	99b	Other diseases of the mouth and annexa	55	.90							1.02	.02
232–236	100	Diseases of the pharynx	4,015	65.43				1	1	.02	55.37	.90
238	102	Ulcer of stomach	18	.29	1	1	.02	3	3	.05	3.20	.05
239–244	103	Other diseases of stomach (cancer excepted)	518	8.44	1	1	.02	2	2	.03	8.51	.14
245–253	105	Diarrhea and enteritis	1,568	25.55	4	2	.03	3	3	.05	19.59	.32
254	106	Ankylostomiasis	42	.68							1.27	.02
255–259	107	Intestinal parasites	51	.83							.65	.01
260	108	Appendicitis	439	7.15	5	4	.06	9	9	.15	33.10	.54
261–263	109	Hernia	279	4.54	11	9	.15	3	3	.05	27.77	.45
264–267	110a	Diseases of the anus and fecal fistula	49	.81							3.29	.05
268–272	110b	Other diseases of the intestines	1,214	19.78	8	7	.11				18.18	.30
275	113	Cirrhosis of liver	3	.05				1	1	.02	.68	.01
276	114	Biliary calculi	10	.16							.29	.00
277–281	115	Other diseases of liver and gall bladder	164	2.67				1			6.71	.11
283–284	117	Simple peritonitis	3	.05				1	1	.02	.25	.00
288	119	Acute nephritis	15	.24				3	3	.05	.95	.02
289–291	120	Bright's disease	42	.69	19	13	.21	8	6	.10	8.89	.15
293–299	122	Other diseases of the kidney and annexa	16	.26	3	2	.03	1	1	.02	1.27	.02
303–306	124	Diseases of the bladder	105	1.71	25	23	.38				6.43	.10
304	124b	Enuresis	54	.88	24	22	.36				3.79	.06
307–309	125	Diseases of the urethra, urinary abscess, etc	64	1.05							2.29	.04
310–312	126	Diseases of the prostate	7	.12							.43	.01
313–319	127	Diseases of the male genital organs (nonvenereal)	224	3.66	1	1	.02				7.43	.12
322–323	143	Furuncle and carbuncle	792	12.90							12.70	.21
324–325	144	Acute abscess and cellulitis	692	11.28	1	1	.02				18.82	.31
352–357	146	Diseases of the bones	110	1.80	7	4	.07				8.36	.13
358–360	147	Diseases of the joints	226	3.68	19	18	.29				15.71	.26
367	149g	Flat foot	108	1.76	78	72	1.16				11.36	.19
372	150	Congenital malformations	179	2.92	4	4	.06				6.03	.10
373–374	154	Senility			1	1	.02					
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	93	1.52							1.98	.03
379	189Ba	Under observation, undiagnosed and unknown	55	.90				3	3	.05	1.52	.02
380	189Bb	Malingering	26	.42							1.17	.02

[1] Including those occurring in the United States proper from commands on duty in Alaska or insula possessions.

atios per 1,000 of mean strength, for enlisted American troops serving in the United States or the year 1914—Continued.

United States, white, enlisted men. S. G. O., 59,534—A. G. O., 60,039.										United States, colored, enlisted men. S. G. O., 1,828—A. G. O., 1,828.									
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
		Number.			Number.							Number.			Number.				
Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.	Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.
1	2.02				2	2	0.03	0.13	0.00										
372	6.25							9.63	.16	22	12.03	1	1	0.55				.079	0.43
37	.62	1	1	0.02				2.98	.05	1	.55							.01	.00
128	2.15							6.00	.10	2	1.09							.17	.09
309	5.19							19.42	.32	5	2.74							.31	.17
585	9.83	2	1	.02				7.53	.12	11	6.02							.23	.12
185	3.11				1	1	.02	3.20	.05	1	.55							.01	.00
10	.17	1	1	.02	1	1	.02	1.03	.02										
2,092	35.14	6	5	.08				37.10	.62	78	42.67							.90	.49
30	.50				1	1	.02	2.39	.04	1	.55							.28	.15
153	2.57	1	1	.02	13	13	.22	12.51	.21	9	4.92				2	2	1.09	.35	.19
153	2.57	4	2	.02				10.06	.16	6	3.28	1	1	.55				.45	.24
5	.08				1	1	.02	.08	.00										
82	1.38	15	12	.20				7.69	.13									.29	.16
								.11	.00										
7	.12							.26	.00										
2	.03							.02	.00										
268	4.50	1						4.15	.07	13	7.11	1						.22	.12
53	.89							.99	.01	2	1.09							.03	.01
3,891	65.36				1	1	.02	53.92	.91	124	67.83							1.45	.79
18	.30	1	1	.02	3	3	.05	3.20	.05										
513	8.62	1	1	.02	2	2	.03	8.44	.14	5	2.74							.07	.04
1,478	24.83	4	2	.03	3	3	.05	18.61	.31	90	49.23							.98	.53
42	.71							1.27	.02										
51	.86							.65	.01										
427	7.17	5	4	.07	8	8	.13	31.67	.53	12	6.56				1	1	.55	1.43	.78
275	4.62	11	9	.15	2	2	.03	27.65	.46	4	2.19				1	1	.55	.12	.07
46	.77							3.22	.05	3	1.64							.07	.04
1,185	19.90	8	7	.12				17.74	.29	29	15.87							.44	.24
3	.05				1	1	.02	.68	.01										
10	.17							.29	.00										
160	2.69				1			6.56	.11	4	2.19							.15	.08
3	.05				1	1	.02	.25	.00										
15	.25				3	3	.05	.95	.02										
40	.67	18	13	.22	8	6	.10	8.49	.15	2	1.09	1						.40	.21
15	.25	3	2	.03	1	1	.02	1.21	.02	1	.55							.06	.03
105	1.76	25	23	.39				6.43	.10										
54	91	24	22	.37				3.79	.06										
61	1.03							2.25	.04	3	1.64							.04	.02
7	.12							.43	.01										
215	3.61	1	1	.02				7.07	.11	9	4.92							.36	.19
783	13.15							12.60	.21	9	4.92							.10	.06
683	11.48	1	1	.02				18.64	.31	9	4.92							.18	.10
106	1.78	7	4	.07				8.02	.15	4	2.19							.34	.19
220	3.70	19	18	.29				15.38	.26	6	3.28							.33	.18
108	1.81	75	70	1.17				11.02	.19			3	2	1.09				.34	.18
174	2.92	4	4	.07				5.91	.10	5	2.74							.12	.06
		1	1	.02															
86	1.44							1.86	.03	7	3.83							.12	.07
52	.87				3	3	.05	1.48	.02	3	1.64							.04	.02
22	.37							.85	.01	4	2.19							.32	.17

[2] Excluding those occurring in the United States proper from commands on duty in Alaska or insular possessions.

TABLE No. 71.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with continental, excluding Alaska,*

Serial Nos.	International classification.	Causes of admission to sick report.	United States, total enlisted men, white and colored.									
		Mean strength	S. G. O., 61,362—A. G. O., 61,867.									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[3]										
426–434	155–163	Suicides, all	12	0.20				37	37	0.60		
435	164	Poisoning by food	66	1.08				1	1	.02		
436	165a	Venomous bites and stings	53	.86								
437	165b	Other poisoning (deleterious gases excepted)	53	.86				7	7	.11		
439	167	Burns (conflagrations excepted)	226	3.68	3	3	0.05					
440	168	Absorption of deleterious gases	6	.10				1	1	.02		
442	169	Drowning, accidental						38	38	.61		
443	170	Traumatism by firearms (other than specified)	179	2.92	25	23	.37	12	12	.19		
444	170a	Shot by sentry or guard	1	.02								
445	171	Traumatism by cutting or piercing instruments	612	9.97	7	6	.10					
446	172	Traumatism by fall	2,279	37.14	21	18	.29	5	5	.08		
447	173	Traumatism in mines and quarries	5	.08								
448	174	Traumatism by machines	62	1.01	1	1	.02					
449	175	Traumatism by other crushing	575	9.37	29	26	.42	12	12	.19		
450	176	Injuries by animals	878	14.31	6	6	.10	2	2	.03		
452	178	Effects of excessive cold	50	.81				1	1	.02		
453	179	Effects of heat	84	1.37				1	1	.02		
455	181	Effects of electricity	2	.03								
456–458	182–4	Homicides, all	13	.21				20	20	.32		
460	186	Other external violence	2,800	45.63	23	19	.31	5	5	.08		
462–466		Killed or wounded in action			1	1	.02					
462		By bullet			1	1	.02					
		DISEASES AND INJURIES GROUPED.										
		General diseases	10,763	175.40	298	228	3.69	77	63	1.02	521.52	8.5
	1–19	Epidemic diseases	3,695	60.22	3	3	.05	16	16	.26	99.32	1.6
	20–59	Other general diseases	7,068	115.19	295	225	3.64	61	47	.76	422.20	6.8
		Diseases of the nervous system and organs of special sense	1,670	27.21	404	308	4.98	17	17	.27	140.21	2.2
	60–74	Of the nervous system	825	13.44	373	282	4.56	17	17	.27	106.92	1.7
	75	Of the eye and its annexa	538	8.77	19	16	.26				21.08	.3
	76	Of the ear and its annexa	307	5.00	12	10	.16				12.21	.2
	77–85	Diseases of the circulatory system	1,053	17.16	61	54	.87	19	19	.31	56.25	.9
	86–98	Diseases of the respiratory system	3,424	55.80	30	23	.37	19	19	.31	84.63	1.3
	99–118	Diseases of the digestive system	8,720	142.11	33	25	.40	324	25	.40	186.38	3.0
	119–127	Diseases of the genito-urinary system	498	8.12	49	40	.65	12	10	.16	29.47	.4
	142–145	Diseases of the skin and cellular tissue	2,762	45.01	10	10	.16				68.61	1.1
	146–149	Diseases of the organs of locomotion	1,342	21.87	112	101	1.63				57.91	.9
	150	Malformations, etc	179	2.92	4	4	.06				6.03	.1
	154	Diseases, results of old age				1	.02					
	189	Ill-defined diseases	198	3.23				3	3	.05	5.03	.0
		Total for disease	30,609	498.83	1,002	794	12.83	174	156	2.52	1,156.06	18.8
	155–186	External causes	8,039	131.01	140	123	1.99	142	142	2.30	277.64	4.5
		Total for disease and external causes	38,648	629.84	1,142	917	14.82	316	298	4.82	1,433.72	23.3

[1] Including those occurring in the United States proper from commands on duty in Alaska or insul possessions.

ratios per 1,000 of mean strength, for enlisted American troops serving in the United States, for the year 1914—Continued.

United States, white, enlisted men. S. G. O., 59,534—A. G. O., 60,039.										United States, colored, enlisted men. S. G. O., 1,828—A. G. O., 1,828.									
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths. Deaths.			No effective.	
Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.	Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
12	0.21				37	37	0.62												
65	1.09				1	1	.02			1	0.55								
49	.82									4	2.19								
53	.89				6	6	.10								1	1	0.55		
222	3.73	3	3	0.05						4	2.19								
6	.10				1	1	.02												
					37	37	.62								1	1	.55		
146	2.45	22	20	.33	11	11	.18			33	18.05	3	3	1.64	1	1	.55		
1	.02																		
588	9.88	7	6	.10						24	13.13								
2,198	36.92	21	18	.30	5	5	.08			81	44.31								
5	.08																		
61	1.02	1	1	.02						1	.55								
561	9.42	27	24	.40	12	12	.20			14	7.66	2	2	1.09					
793	13.32	6	6	.10	2	2	.03			85	46.50								
49	.82				1	1	.02			1	.55								
84	1.41				1	1	.02												
2	.03																		
9	.15				16	16	.27			4	2.19				4	4	2.19		
2,724	45.75	21	18	.30	5	5	.08			76	41.57	2	1	.55					
		1	1	.02															
		1	1	.02															
10,564	177.44	269	210	3.50	71	61	1.02	496.86	8.35	199	108.86	29	18	9.85	6	2	1.09	24.66	13.49
3,624	60.87	3	3	.05	16	16	.27	98.24	1.65	71	38.84							1.08	.59
6,940	116.57	266	207	3.45	55	45	.75	398.62	6.70	128	70.02	29	18	9.85	6	2	1.09	23.58	12.90
1,624	27.28	377	292	4.86	17	17	.28	131.89	2.22	46	25.16	27	16	8.75				8.32	4.55
803	13.49	349	269	4.48	17	17	.28	100.40	1.69	22	12.03	24	13	7.11				6.52	3.57
519	8.72		14	.23	17			19.40	.33	19	10.39	2	2	1.09				1.68	.92
302	5.07	11	9	.15				12.09	.20	5	2.74	1	1	.55				.12	.06
1,011	16.98	55	48	.80	15	14	.23	52.95	.89	42	22.97	6	6	3.28	5	5	2.74	3.30	1.81
3,318	55.73	29	22	.37	17	17	.28	82.12	1.38	106	57.99	1	1	.55	2	2	1.09	2.51	1.37
8,434	141.67	32	25	.42	25	23	.38	181.43	3.05	286	156.45	1			2	2	1.09	4.95	2.71
481	8.08	48	40	.67	12	10	.17	28.60	.48	17	9.30	1						.87	.48
2,729	45.84	9	9	.15				67.75	1.14	33	18.05	1	1	.55				.86	.47
1,289	21.65	109	99	1.65				56.27	.95	53	28.99	3	2	1.09				1.64	.90
174	2.92	4	4	.07				5.91	.10	5	2.74							.12	.06
			1	.02															
182	3.06				3	3	.05	4.52	.08	16	8.75							.51	.28
29,806	500.66	933	750	12.49	159	145	2.42	1,108.33	18.62	803	439.28	69	44	24.07	15	11	6.02	47.73	26.11
7,708	129.47	130	116	1.93	135	135	2.25	263.72	4.43	331	181.07	10	7	3.83	7	7	3.83	13.92	7.62
37,514	630.13	1,063	866	14.42	294	280	4.66	1,372.06	23.05	1,134	620.35	79	51	27.90	22	18	9.85	61.66	33.73

[2] Excluding those occurring in the United States proper from commands on duty in Alaska or insular possessions.
[3] Noneffectiveness for individual external causes not tabulated.

TABLE No. 71½.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with total, year*

Serial Nos.	International classification.	Causes of admission to sick report.	Philippine Islands, officers.									
		Mean strength	S. G. O., 670—A. G. O., 711.									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
2	1a	Paratyphoid fever										
5	2	Typhus fever										
7–11	4	Malaria	49	73.13							2.53	3.78
7	.....	Estivo-autumnal fever	21	31.34							1.55	2.31
8	.....	Malarial cachexia										
9	.....	Quartan malarial fever	2	2.99							.03	.04
10	.....	Tertian malarial fever	13	19.40							.43	.64
11	.....	Undetermined malarial fever	13	19.40							.53	.79
12	5	Smallpox and varioloid										
13	5b	Vaccinia										
14	6	Measles										
17	9	Diphtheria										
18	10	Influenza	2	2.99							.03	.04
19	12	Asiatic cholera										
21–23	14	Dysentery	6	8.96							.52	.77
21	.....	Bacillary										
22	.....	Entamebic	6	8.96							.52	.77
23	.....	Unclassified										
26	17	Leprosy										
29	19b	Dengue	26	38.81							.45	.68
31	19d	German measles										
34	19g	Mumps										
37	20	Purulent infection and septicemia										
42–46	25	Mycoses										
48	27	Beriberi										
49–57	28–34	Tuberculosis, all	2	2.99				1	1	1.41	.38	.56
49–51	28	Tuberculosis of lungs	2	2.99				1	1	1.41	.38	.56
52	29	Miliary tuberculosis, acute										
53–57	30–34	Tuberculosis of other organs										
58	36	Scoliosis (rickets)										
59–74	37–38	Venereal diseases, all	7	10.45							.32	.47
59–64	37	Syphilis	5	7.46							.30	.45
65–67	38a	Soft chancre										
68–74	38b	Gonococcus infection	2	2.99							.01	.02
75–79	39–45	Cancer and other malignant tumors	1	1.49							.05	.08
80	46	Benign tumors										
81–85	47–48	Rheumatism, articular, all	8	11.94							.72	1.07
81–82	47	Acute articular rheumatism	4	5.97							.06	.09
83–85	48	Chronic articular rheumatism	4	5.97							.65	.98
89	51	Exophthalmic goitre										
97–100	56	Alcoholism and results	6	8.96							.11	.17
103–104	59	Other chronic poisoning, including drug habit										
105–106	60	Encephalitis										
107	61	Simple meningitis										
108	61a	Epidemic cerebrospinal meningitis										
109	62	Locomotor ataxia	1	1.49							.15	.23
117–119	66	Paralysis without specified cause										
120–126	67–68	Mental alienation	3	4.48							.37	.55
127	69	Epilepsy										
129–133	73	Neuralgia and neuritis	7	10.45							.35	.52
138–141	75a	Conjunctivitis	2	2.99							.07	.11
142	75b	Trachoma										
166	77	Pericarditis										
169–174	79	Organic heart disease	2	2.99							.22	.34
175	80	Angina pectoris										
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc										

[1] Number of discharges and deaths which actually occurred.

ratios per 1,000 of mean strength, for Philippine Islands, officers, total enlisted, and grand 1914.

Philippine Islands, total enlisted (including Philippine Scouts).										Philippine Islands, total officers and enlisted men (including scouts).									
S. G. O., 15,273—A. G. O., 15,571.										S. G. O., 15,943—A. G. O., 16,282.									
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
		Number.			Number.							Number.			Number.				
Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.	Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.
3	0.20							0.57	0.04	3	0.19							0.57	0.04
18	1.18				1	1	0.06	.93	.06	18	1.13				1	1	0.06	.93	.06
1,477	96.71							29.00	1.90	1,526	95.71							31.53	1.98
362	23.70							8.05	.53	383	24.02							9.59	.60
6	.39							.67	.04	6	.38							.67	.04
8	.52							.30	.02	10	.63							.32	.02
922	60.37							17.07	1.12	935	58.64							17.50	1.10
179	11.72							2.91	.19	192	12.04							3.44	.22
7	.46							.50	.03	7	.44							.50	.03
14	.92							.22	.01	14	.88							.22	.01
24	1.57							2.24	.15	24	1.51							2.24	.14
1	.07							.02	.00	1	.06							.02	.00
23	1.51							.42	.03	25	1.57							.44	.03
2	.13							.11	.01	2	.13							.11	.01
178	11.65				3	3	.19	9.76	.64	184	11.54		4	0.26	3	3	.18	10.28	.64
22	1.44							1.36	.09	22	1.38							1.36	.09
146	9.56				3	3	.19	8.14	.53	152	9.53				3	3	.18	8.66	.54
10	.65							.26	.02	10	.63							.26	.02
4	.26	4	4	0.26				1.09	.07	4	.25	4	4	.26				1.09	.07
368	24.09							6.13	.40	394	24.71							6.58	.41
								.05	.00									.05	.00
110	7.20							5.15	.34	110	6.90							5.15	.32
					1	1	.06								1	1	.06		
2	.13							.09	.01	2	.13							.09	.01
2	.13							.03	.00	2	.13							.03	.00
108	7.07	26	62	3.98	4	7	.45	10.27	.67	110	6.90	26	62	3.98	4	8	.49	10.65	.67
97	6.35	22	56	3.60	2	3	.19	8.27	.54	99	6.21	22	56	3.60	2	4	.25	8.64	.54
1	.07				1	2	.12	.10	.01	1	.06				1	2	.12	.10	.01
10	.67	4	6	.38	1	2	.12	1.90	.13	10	.62	4	6	.38	1	2	.12	1.90	.12
1	.07							.01	.00	1	.06							.01	.00
2,192	143.52		8	.51	2	2	.12	125.13	8.19	2,199	137.93		8	.51	2	2	.12	125.45	7.87
532	34.83		5	.32	1	1	.06	30.47	1.99	537	33.68		5	.32	1	1	.06	30.77	1.93
599	39.22							30.19	1.98	599	37.57							30.19	1.89
1,061	69.47		3	.19	1	1	.06	64.47	4.22	1,063	66.67		3	.19	1	1	.06	64.49	4.05
3	.20					2	.12	.54	.04	4	.25					2	.12	.59	.04
20	1.31							.67	.04	20	1.25							.67	.04
47	3.08							3.58	.24	55	3.45							4.30	.27
31	2.03							1.64	.11	35	2.20							1.70	.11
16	1.05							1.94	.13	20	1.25							2.60	.16
2	.13							.14	.01	2	.13							.14	.01
230	15.07		1	.06	2	2	.13	3.51	.23	236	4.80		1	.06	2	2	.12	3.62	.23
5	.33							.19	.01	5	.31							.19	.01
1	.06				1	1	.06	.02	.00	1	.06				1	1	.06	.02	.00
1	.06				1	1	.06	.02	.00	1	.06				1	1	.06	.02	.00
1	.06				1	1	.06	.10	.01	1	.06				1	1	.06	.10	.01
										1	.06							.15	.01
1	.07							.08	.00	1	.06							.08	.00
78	5.11	10	47	3.02				5.70	.37	81	5.08	10	47	3.02				6.07	.38
12	.79		3	.19				.75	.05	12	.75		3	.09				.75	.05
61	3.99	1	4	.25				2.80	.18	68	4.27	1	4	.25				3.15	.20
99	6.48							1.85	.12	101	6.34							1.93	.12
7	.46		2	.13				.49	.03	7	.44		2	.13				.49	.03
2	.13							.05	.00	2	.13							.05	.00
26	1.70		1	.06	1	1	.06	1.16	.08	28	1.76		1	.06	1	1	.06	1.38	.09
1	.07							.01	.00	1	.06							.01	.00
7	.46		1	.06	3	3	.18	.26	.02	7	.44		1	.06	3	3	.18	.26	.02

[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

TABLE No. 71½.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with total, year*

Serial Nos.	International classification.	Causes of admission to sick report.	Philippine Islands, officers.								
		Mean strength	S. G. O., 670—A. G. O., 711.								
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)			
178–179	82	Embolism and thrombosis										
181	83b	Hemorrhoids	6	8.96							0.06	0.09
183	83d	Varicose veins										
184	83e	Varicocele										
185–187	84	Diseases of lymphatic system	1	1.49							.03	.05
193–199	86	Diseases of the nasal fossæ	12	17.91							.12	.17
200–202	87	Diseases of the larynx	1	1.49							.00	.01
203–204	88	Diseases of the thyroid body										
205–206	89–90	Bronchitis	23	34.33							.32	.48
207	91	Bronchopneumonia										
208	92	Pneumonia	2	2.99							.13	.19
209–215	93	Pleurisy	1	1.49							.01	.01
216–217	94	Pulmonary congestion and pulmonary apoplexy										
219	96	Asthma	1	1.49							.01	.01
220	97	Pulmonary emphysema										
221	98a	Hemoptysis										
222	98b	Hay fever										
224–227	99a	Diseases of the teeth and gums	11	16.42							.20	.30
228–231	99b	Other diseases of the mouth and annexa	1	1.49							.04	.06
232–236	100	Diseases of the pharynx	10	14.93							.10	.14
238	102	Ulcer of stomach										
239–244	103	Other diseases of stomach (cancer excepted)	15	22.39							.19	.28
245–253	105	Diarrhea and enteritis	42	62.69							1.45	2.16
254	106	Ankylostomiasis										
255–259	107	Intestinal parasites	1	1.49							.00	.00
260	108	Appendicitis	10	14.93							.79	1.18
261–263	109	Hernia	3	4.48							.49	.73
264–267	110a	Diseases of the anus and fecal fistula										
268–272	110b	Other diseases of the intestines	14	20.90							.33	.49
275	113	Cirrhosis of liver										
276	114	Biliary calculi										
277–281	115	Other diseases of liver and gall bladder	4	5.97							.14	.21
288	119	Acute nephritis	2	2.99							.09	.13
289–291	120	Bright's disease										
293–299	122	Other diseases of the kidney and annexa	1	1.49							.03	.04
303–306	124	Diseases of the bladder	2	2.99							.05	.08
304	124b	Enuresis										
307–309	125	Diseases of the urethra, urinary abscess, etc	1	1.49							.05	.07
313–319	127	Diseases of the male genital organs (nonvenereal)	2	2.99							.01	.01
322–323	143	Furuncle and carbuncle	9	13.43							.19	.28
324–325	144	Acute abscess and cellulitis	7	10.45							.15	.23
352–357	146	Diseases of the bones	5	7.46							.15	.23
358–360	147	Diseases of the joints	4	5.97							.45	.68
367	149g	Flat foot										
372	150	Congenital malformations										
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	4	5.97							.02	.03
379	189Ba	Under observation, undiagnosed and unknown										
380	189Bb	Malingering										

[1] Number of discharges and deaths which actually occurred.

ratios per 1,000 of mean strength, for Philippine Islands, officers, total enlisted, and grand 1914—Continued.

Philippine Islands, total enlisted (including Philippine Scouts).										Philippine Islands, total officers and enlisted men (including scouts).									
S. G. O., 15,273—A. G. O., 15,571.										S. G. O., 15,943—A. G. O., 16,282.									
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
		Number.			Number.							Number.			Number.				
Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.	Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.
2	0.13							0.12	0.01	2	0.13							0.12	0.01
77	5.04							2.16	.14	83	5.21							2.22	.14
13	.85							.98	.06	13	.82							.98	.06
43	2.82							1.86	.12	43	2.70							1.86	.12
144	9.43							6.92	.45	145	9.10							6.95	.44
165	10.80							2.34	.15	177	11.10							2.46	.15
21	1.37							.48	.03	22	1.38							.48	.03
3	.20							.21	.01	3	.19							.21	.01
447	29.27		1	0.06				11.43	.75	470	29.48		1	0.06				11.75	.74
8	.52							.96	.06	8	.50							.96	.06
17	1.11							1.65	.11	19	1.19							1.78	.11
39	2.55		2	.13				1.93	.13	40	2.51		2	.13				1.94	.12
11	.72							.29	.02	11	.69							.29	.02
18	1.18							.74	.05	19	1.19							.75	.05
2	.13							.03	.00	2	.13							.03	.00
2	.13							.05	.00	2	.13							.05	.00
								.01	.03									.01	.00
68	6.45		1	.06				1.33	.09	79	4.96		1	.06				1.53	.10
10	.65							.25	.02	11	.69							.28	.02
416	27.24							6.57	.43	426	26.72							6.67	.42
6	.39							.88	.06	6	.38							.88	.05
215	14.08							3.81	.25	230	14.43							4.00	.25
780	51.07		2	.13				10.82	.71	822	51.56		2	.13				12.27	.77
89	5.83							2.51	.16	89	5.58							2.51	.16
72	4.71							1.91	.12	73	4.58							1.91	.12
125	8.18				3	3	0.19	9.41	.62	135	8.47				3	3	0.18	10.20	.64
32	2.10				2	2	.13	3.57	.23	35	2.20				2	2	.12	4.06	.25
14	.92							.91	.06	14	.88							.91	.06
626	40.99		1	.06				7.66	.50	640	40.14		1	.06				7.98	.50
								.00	.00									.00	.00
2	.13							.18	.01	2	.13							.18	.01
73	4.78				1	1	.06	3.53	.23	77	4.83				1	1	.06	3.67	.23
2	.13							.03	.00	4	.25							.12	.01
3	.20							.41	.03	3	.19							.41	.03
4	.26							.20	.01	5	.31							.23	.01
21	1.37	1	1	.06				1.00	.07	23	1.44	1	1	.06				1.05	.07
9	.59							.52	.03	9	.56							.52	.03
38	2.69							.62	.04	39	2.45							.67	.04
63	4.12							1.77	.12	65	4.08							1.78	.11
406	26.58							7.66	.50	415	26.03							7.85	.49
274	17.94							8.65	.57	281	17.63							8.80	.55
35	2.29							2.41	.16	40	2.51							2.57	.16
47	3.08	1	2	.13				2.78	.18	51	3.20	1	2	.13				3.24	.20
13	.85		2	.13				1.04	.07	13	.82		2	.13				1.04	.06
87	5.70							3.11	.20	87	5.46							3.11	.20
64	4.19							1.68	.11	68	4.26							1.70	.11
6	.39							.35	.02	6	.38							.35	.02
5	.33							.09	.01	5	.31							.09	.01

[1] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

TABLE NO. 71½.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with total, year*

Serial Nos.	International classification.	Causes of admission to sick report.	Philippine Islands, officers. Mean strength..... S. G. O., 670—A. G. O., 711. Admissions. Number.	Admissions. Ratio.	Discharges. Number. (1)	Discharges. Number. (2)	Discharges. Ratio.	Deaths. Number. (1)	Deaths. Number. (2)	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[2]										
426–434	155–163	Suicides, all										
435	164	Poisoning by food	3	4.48								
436	165a	Venomous bites and stings	1	1.49								
437	165b	Other poisoning (deleterious gases excepted)										
439	167	Burns (conflagrations excepted)	1	1.49								
441	168a	Suffocation, strangulation										
442	169	Drowning, accidental										
443	170	Traumatism by firearms (other than specified)										
444	170a	Shot by sentry or guard										
445	171	Traumatism by cutting or piercing instruments	4	5.97								
446	172	Traumatism by fall	22	32.84								
448	174	Traumatism by machines										
449	175	Traumatism by other crushing										
450	176	Injuries by animals	8	11.94								
453	179	Effects of heat	3	4.48								
456–458	182–184	Homicides, all										
460	186	Other external violence	23	34.33								
462–466	.....	Killed or wounded in action										
462	.....	By bullet										
		DISEASES AND INJURIES GROUPED.										
		General diseases	110	164.18					1	1.41	5.38	8.03
	1–19	Epidemic diseases	84	125.37							3.53	5.28
	20–59	Other general diseases	26	38.81					1	1.41	1.85	2.76
		Diseases of the nervous system and organs of special sense	47	70.15							2.59	3.86
	60–74	Of the nervous system	24	35.82							1.38	2.05
	75	Of the eye and its annexa	18	26.87							.91	1.36
	76	Of the ear and its annexa	5	7.46							.30	.45
	77–85	Diseases of the circulatory system	10	14.93							.33	.49
	86–98	Diseases of the respiratory system	40	59.70							.59	.88
	99–118	Diseases of the digestive system	111	165.67							3.73	5.56
	119–127	Diseases of the genito-urinary system	11	16.42							.32	.47
	142–145	Diseases of the skin and cellular tissue	31	46.27							1.16	1.74
	146–149	Diseases of the organs of locomotion	25	37.31							1.28	1.91
	150	Malformations, etc										
	189	Ill-defined diseases	6	8.96							.04	.06
		Total for disease	391	583.58					1	1.41	15.41	23.00
	155–186	External causes	67	100.00							2.84	4.23
		Total for disease and external causes	458	683.58					1	1.41	18.24	27.23

[1] Number of discharges and deaths which actually occurred.
[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

ratios per 1,000 of mean strength, for Philippine Islands, officers, total enlisted, and grand 1914—Continued.

Philippine Islands, total enlisted (including Philippine Scouts).									Philippine Islands, total officers and enlisted men (including Scouts).									
S. G. O., 15,273—A. G. O., 15,571.									S. G. O., 15,943—A. G. O., 16,282.									
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
		(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
1	0.07				3	3	0.18			1	0.06				3	3	0.18		
119	7.79				3	3	.18			122	7.65				3	3	.18		
28	1.83									29	1.82								
6	.39				4	4	.26			6	.36				4	4	.25		
62	4.06									63	3.95								
1	.07									1	.06								
					4	4	.26								4	4	.25		
26	1.70	1	1	0.06	2	2	.13			26	1.63	1	1	0.06	2	2	.12		
2	.13									2	.13								
145	9.49		1	.06						149	9.35		1	.06					
505	33.06		1	.06	1	1	.06			527	33.05		1	.06	1	1	.06		
10	.65									10	.63								
100	6.55									100	6.27								
99	6.48									107	6.71								
51	3.34									54	3.39								
2	.13				6	6	.39			2	.13				6	6	.37		
651	42.62		1	.06	1	1	.06			674	42.27		1	.06	1	1	.06		
1	.07	3	3	.19						1	.06	3	3	.19					
1	.07	3	3	.19						1	.06	3	3	.19					
4,879	319.45	30	75	4.82	14	19	1.22	201.99	13.22	4,989	312.93	30	75	4.82	14	20	1.23	207.37	12.99
2,257	147.78	4	4	.26	4	4	.26	57.24	3.75	2,341	146.83	4	4	.26	4	4	.25	60.78	3.81
2,622	171.68	26	71	4.56	10	15	.96	144.74	9.48	2,648	166.10	26	71	4.56	10	16	.98	146.59	9.19
495	32.41	13	63	4.04	3	3	.18	19.57	1.28	542	34.00	13	63	4.04	3	3	.18	22.16	1.39
215	14.08	11	57	3.66	3	3	.18	11.87	.78	239	14.99	11	57	3.66	3	3	.18	13.25	.83
161	10.54	2	5	.32				5.04	.33	179	11.23	2	5	.32				5.95	.37
119	7.79		1	.06				2.65	.17	124	7.78		1	.06				2.95	.19
336	22.00		2	.13	4	4	.26	14.14	.93	346	21.70		2	.13	4	4	.25	14.47	.91
735	48.12		3	.19				20.14	1.32	775	48.61		3	.19				20.73	1.30
2,531	165.70		4	.26	6	6	.37	53.55	3.51	2,642	165.73		4	.26	6	6	.37	57.27	3.59
135	8.84	1	1	.06				4.11	.27	146	9.16	1	1	.06				4.43	.28
1,224	80.14							30.56	2.00	1,255	78.72							31.73	1.99
254	16.63	1	4	.26				11.04	.72	279	17.50	1	4	.26				12.32	.77
87	5.70							3.11	.20	87	5.46							3.11	.20
83	5.43							2.30	.15	89	5.58							2.34	.15
10,759	704.45	45	152	9.76	27	32	2.06	360.51	23.60	11,150	699.36	45	152	9.76	27	33	2.03	375.92	23.58
1,825	119.49	4	8	.51	24	24	.56	54.96	3.60	1,892	118.67	4	8	.51	24	24	1.47	57.79	3.62
12,584	823.94	49	160	10.28	51	56	3.60	415.46	27.20	13,042	818.04	49	160	10.28	51	57	3.50	433.71	27.20

[3] Noneffectiveness for individual external causes not tabulated.

TABLE No. 72.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with white and colored,*

Serial Nos.	International classification.	Causes of admission to sick report.	Philippine Islands, total, American, enlisted men, white and colored.									
		Mean strength	S. G. O., 10,253—A. G. O., 10,551.									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)			
2	1a	Paratyphoid fever	1	0.10							0.26	0.03
5		Typhus fever									.27	.00
7–11	4	Malaria	464	45.26							11.56	1.13
7		Estivo-autumnal fever	97	9.46							3.01	.29
8		Malarial cachexia	5	.49							.36	.03
9		Quartan malarial fever	6	.59							.27	.03
10		Tertian malarial fever	301	29.35							6.90	.67
11		Undetermined malarial fever	55	5.36							1.02	.10
13	5b	Vaccinia	1	.10							.01	.00
14	5	Measles	7	.68							1.42	.14
17	9	Diphtheria	1	.10							.02	.00
18	10	Influenza	23	2.24							.42	.04
19	12	Asiatic cholera									.05	.00
21–23	14	Dysentery	133	12.97				1	1	0.09	7.81	.76
21		Bacillary	16	1.56							1.05	.10
22		Entamebic	108	10.53				1	1	.09	6.52	.64
23		Unclassified	9	.88							.23	.02
29	19b	Dengue	340	33.16							5.63	.55
31	19d	German measles									.05	.01
34	19g	Mumps	69	6.73							3.10	.30
37	20	Purulent infection and septicemia						1	1	.09		
42–46	25	Mycoses	2	.20							.09	.01
49–57	28–34	Tuberculosis, all	75	7.31		36	3.41		3	.28	6.14	.60
49–51	28	Tuberculosis of lungs	71	6.92		34	3.22		1	.09	5.64	.55
52	29	Miliary tuberculosis, acute							1	.09		
53–57	30–34	Tuberculosis of other organs	4	.39		2	.18		1	.09	.50	.05
59–74	37–38	Venereal diseases, all	1,903	185.60		8	.76	1	1	.09	106.76	10.41
59–64	37	Syphilis	487	47.49		5	.47	1	1	.09	26.26	2.56
65–67	38a	Soft chancre	565	55.10							28.27	2.76
68–74	38b	Gonococcus infection	851	83.00		3	.28				52.24	5.10
75–79	39–45	Cancer and other malignant tumors	3	.29					2	.19	.54	.05
80	46	Benign tumors	11	1.07							.34	.03
81–85	47–48	Rheumatism, articular, all	30	2.93							2.45	.24
81–82	47	Acute articular rheumatism	16	1.56							.93	.09
83–85	48	Chronic articular rheumatism	14	1.37							1.52	.15
89	51	Exophthalmic goitre	2	.20							.14	.01
97–100	56	Alcoholism and results	227	22.14		1	.09	2	2	.19	3.49	.34
103–104	59	Other chronic poisoning, including drug habit	5	.49							.19	.02
105–106	60	Encephalitis	1	.10				1	1	.09	.02	.00
108	61a	Epidemic cerebrospinal meningitis	1	.10				1	1	.09	.10	.01
117–119	66	Paralysis without specified cause	1	.10							.08	.01
120–126	67–68	Mental alienation	64	6.24		37	3.51				4.91	.48
127	69	Epilepsy	12	1.17		3	.28				.75	.07
129–133	73	Neuralgia and neuritis	47	4.58		3	.28				1.94	.19
138–141	75a	Conjunctivitis	55	5.36							.93	.09
142	75b	Trachoma	6	.59		2	.19				.46	.04
166	77	Pericarditis	2	.20							.05	.00
169–174	79	Organic heart disease	25	2.44		1	.09	1	1	.09	1.12	.11
175	80	Angina pectoris	1	.10							.01	.00
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc.	7	.68		1	.09	3	3	.28	.26	.03

[1] Number of discharges and deaths which actually occurred.

ratios per 1,000 of mean strength, for Philippine Islands. American troops, enlisted men, year 1914.

Philippine Islands, white, American, enlisted men.									Philippine Islands, colored, American, enlisted men.								
S. G. O., 8,375—A. G. O., 8,673.									S. G. O., 1,878—A. G. O., 1,878.								
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
		(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
1	0.12							0.26	0.03										
								.27	.00										
407	48.60							10.50	1.25	57	30.35							1.05	0.56
83	9.91							2.72	.32	14	7.45							.29	.16
5	.60							.36	.04										
5	.60							.25	.03	1	.53							.02	.01
274	32.72							6.41	.77	27	14.38							.48	.26
40	4.78							.77	.09	15	7.99							.26	.14
1	.12							.01	.00										
7	.84							1.42	.17										
1	.12							.02	.00										
23	2.75							.42	.05										
								.05	.01										
106	12.66				1	1	0.12	6.81	.81	27	14.38							.99	.53
15	1.79							.95	.11	1	.53							.10	.06
87	10.39				1	1	.12	5.75	.69	21	11.18							.77	.41
4	.48							.11	.01	5	2.66							.12	.06
286	34.15							4.80	.57	54	28.75							.83	.44
								.05	.01										
61	7.28							2.90	.35	8	4.26							.20	.11
					1	1	.12												
										2	1.06							.09	.05
54	6.45		31	3.57		2	.23	4.55	.54	21	11.18		5	2.66		1	0.53	1.59	.84
52	6.21		30	3.46		1	.12	4.21	.50	19	10.12		4	2.13				1.42	.76
																1	.53		
2	.24		1	.12		1	.12	.34	.04	2	1.06		1	.53				.16	.09
1,464	174.79		6	.69	1	1	.12	84.19	10.05	439	233.76		21	1.06				22.57	12.02
396	47.28		4	.46	1	1	.12	20.39	2.43	91	48.46		1	.53				5.87	3.12
397	47.40							20.48	2.45	168	89.46							7.79	4.15
671	80.11		2	.23				43.32	5.17	180	95.85		1	.53				8.92	4.75
3	.36					2	.23	.54	.06										
10	1.19							.32	.04	1	.53							.02	.01
28	3.34							2.43	.29	2	1.06							.02	.01
14	1.67							.92	.11	2	1.06							.02	.01
14	1.67							1.52	.18										
1	.12							.04	.00	1	.53							.10	.06
215	25.67		1	.12	1	1	.12	3.24	.39	12	6.39				1	1	.53	.26	.14
4	.48							.17	.02	1	.53							.02	.01
1	.12				1	1	.12	.02	.00										
1	.12				1	1	.12	.10	.01										
										1	.53							.08	.04
55	6.57		33	3.81				4.45	.53	9	4.79		4	2.13				.45	.24
10	1.19		3	.35				.60	.07	2	1.06							.15	.08
43	5.13		1	.12				1.45	.17	4	2.13		2	1.06				.49	.26
49	5.85							.87	.10	6	3.19							.05	.03
6	.72		2	.23				.46	.05										
2	.24							.05	.01										
12	1.43		1	.12	1	1	.12	.70	.08	13	6.92							.42	.22
1	.12							.01	.00										
6	.72		1	.12	2	2	.23	.20	.02	1	.53				1	1	.53	.07	.04

[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

TABLE No. 72.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with white and colored,*

Serial Nos.	International classification.	Causes of admission to sick report.	Philippine Islands, total, American, enlisted men, white and colored.									
		Mean strength	S. G. O., 10,253—A. G. O., 10,551.									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
178–179	82	Embolism and thrombosis	2	0.20							0.12	0.01
181	83b	Hemorrhoids	74	7.22							2.01	.20
183	83d	Varicose veins	13	1.27							.98	.10
184	83e	Varicocele	41	4.00							1.79	.17
185–187	84	Diseases of the lymphatic system	109	10.63							5.24	.51
193–199	86	Diseases of the nasal fossæ	153	14.92							2.25	.22
200–202	87	Diseases of the larynx	15	1.46							.30	.03
203–204	88	Diseases of the thyroid body	3	.29							.21	.02
205–206	89–90	Bronchitis	324	31.60		1	0.09				8.41	.82
207	91	Bronchopneumonia	6	.59							.55	.05
208	92	Pneumonia	9	.88							.72	.07
209–215	93	Pleurisy	28	2.73		2	.19				1.37	.13
216–217	94	Pulmonary congestion and pulmonary apoplexy	11	1.07							.29	.03
219	96	Asthma	15	1.46							.56	.05
220	97	Pulmonary emphysema	2	.20							.03	.00
221	98a	Hæmoptysis	1	.10							.03	.00
224–227	99a	Diseases of the teeth and gums	50	4.88		1	.09				1.12	.11
228–231	99b	Other diseases of the mouth and annexa	7	.68							.19	.02
232–236	100	Diseases of the pharynx	395	38.53							6.21	.61
238	102	Ulcer of stomach	6	.59							.88	.09
239–244	103	Other diseases of stomach (cancer excepted)	181	17.65							3.44	.34
245–253	105	Diarrhea and enteritis	647	63.10		2	.19				9.30	.91
254	106	Ankylostomiasis	6	.59							.19	.02
255–259	107	Intestinal parasites	18	1.76							.91	.09
260	108	Appendicitis	122	11.90				3	3	0.28	9.04	.88
261–263	109	Hernia	27	2.63							3.21	.31
264–267	110a	Diseases of the anus and fecal fistula	12	1.17							.84	.08
268–272	110b	Other diseases of the intestines	395	38.53		1	.09				5.32	.52
275	113	Cirrhosis of liver									.01	.00
276	114	Biliary calculi	1	.10							.17	.02
277–281	115	Other diseases of liver and gall bladder	68	6.63				1	1	.09	3.33	.32
289–291	120	Bright's disease	3	.29							.36	.04
293–299	122	Other diseases of the kidney and annexa	4	.39							.20	.02
303–306	124	Diseases of the bladder	21	2.05	1	1	.09				1.00	.10
304	124b	Enuresis	9	.88							.52	.05
307–309	125	Diseases of the urethra, urinary abscess, etc	28	2.73							.40	.04
313–319	127	Diseases of the male genital organs (nonvenereal)	45	4.39							1.36	.13
322–323	143	Furuncle and carbuncle	254	24.77							4.56	.45
324–325	144	Acute abscess and cellulitis	138	13.46							4.67	.45
352–357	146	Diseases of the bones	29	2.83							1.97	.19
358–360	147	Diseases of the joints	30	2.93		1	.09				2.07	.20
367	149g	Flat foot	12	1.17		2	.19				.96	.09
372	150	Congenital malformations	54	5.27							1.71	.17
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	45	4.39							1.33	.13
379	189Ba	Under observation, undiagnosed and unknown	6	.59							.35	.03
380	189Bb	Malingering	1	.10							.01	.00

[1] Number of discharges and deaths which actually occurred.

atios per 1,000 of mean strength, for Philippine Islands, American troops, enlisted men, ear 1914—Continued.

Philippine Islands, white, American, enlisted men.										Philippine Islands, colored, American, enlisted men.									
S. G. O., 8,375—A. G. O., 8,673.										S. G. O., 1,878—A. G. O., 1,878.									
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
		(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
2	0 24							0.12	.01										
51	6.09							1.53	.18	23	12 25							0.48	0.25
13	1.55							.98	.12										
39	4.66							1.73	.21	2	1.06							.05	.03
85	10.15							4.03	.48	24	12.78							1.21	.64
139	16.60							2.07	.25	14	7.45							.17	.09
15	1.79							.30	.04										
2	.24							.10	.01	1	.53							.10	.05
274	32.72		1	0.12				7.41	.89	50	26.62							1.00	.53
5	.60							.49	.06	1	.53							.06	.03
8	.96							.68	.08	1	.53							.03	.02
25	2.99		2	23				1.30	.16	3	1.60							.07	.04
11	1.31							.29	.04										
15	1.79							.56	.07										
2	.24							.03	.00										
1	.12							.03	.00										
47	5.61		1	.12				1.08	.13	3	1.60							.04	.02
6	.72							.13	.02	1	.53							.06	.03
346	41.32							5.50	.66	49	26.09							.72	.38
6	.72							.88	.10										
170	20.30							3.23	.39	11	5.86							.21	.11
576	68.78		2	.23				8.48	1.01	71	37.81							.82	.44
4	.48							.12	.01	2	1.06							.07	.04
17	2.03							.86	.10	1	.53							.05	.03
115	13.73				3	3	0.35	8.70	1.04	7	3.73							.34	.18
23	2.75							2.85	.34	4	2.13							.36	.19
9	1.07							.69	.08	3	1.60							.16	.08
295	35.23		1	.12				4.14	.49	100	53.25							1.18	.63
								.01	.00										
1	.12							.13	.02									.04	.02
62	7.40				1	1	.12	3.16	.38	6	3.20							.17	.09
3	.36							.36	.04										
3	.36							.19	.02	1	0.53							.02	.01
17	2.03	1	1	.12				.83	.10	4	2.13							.17	.09
9	1.07							.52	.06										
25	2.99							.32	.04	3	1.60							.08	.04
35	4.18							1.02	.12	10	5.32							.34	.18
231	27.58							4.28	.51	23	12.24							.28	.15
122	14.57							4.32	.52	16	8.52							.36	.19
24	2.87							1.38	.17	5	2.66							.59	.31
22	2.63		1	.12				.92	.11	8	4.20							1.16	.62
9	1.07		1	.12				.80	.10	3	1.60		1	0.53				.16	.09
20	2.39							.78	.09	34	18.10							.93	.49
41	4.90							1.26	.15	4	2.13							.07	.04
5	.60							.30	.04	1	.53							.05	.03
1	.12							.01	.00										

[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

TABLE No. 72.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with white and colored*

Serial Nos.	International classification.	Causes of admission to sick report.	Philippine Islands, total, American, enlisted men, white and colored.									
		Mean strength	S. G. O., 10,253—A. G. O., 10,551.									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[3]										
426–434	155–163	Suicides, all	1	.10				2	2	.19		
435	164	Poisoning by food	116	11.31				2	2	.19		
436	165a	Venomous bites and stings	14	1.37								
437	165b	Other poisoning (deleterious gases excepted)	5	.49				3	3	.28		
439	167	Burns (conflagrations excepted)	46	4.49								
441	168a	Suffocation, strangulation	1	.10								
442	169	Drowning, accidental						4	4	.38		
443	170	Traumatism by firearms (other than specified)	17	1.66				2	2	.19		
444	170a	Shot by sentry or guard	2	.20								
445	171	Traumatism by cutting or piercing instruments	78	7.61		1	.09					
446	172	Traumatism by fall	383	37.35		1	.09	1	1	.09		
448	174	Traumatism by machines	6	.59								
449	175	Traumatism by other crushing	62	6.05								
450	176	Injuries by animals	99	9.66								
453	179	Effects of heat	36	3.51								
456–458	182–4	Homicides, all	2	.20				4	4	.37		
460	186	Other external violence	466	45.45		1	.09	1	1	.09		
		DISEASES AND INJURIES GROUPED.										
		General diseases	3,314	323.21		45	4.27	6	11	1.04	151.25	14.7
	1–19	Epidemic diseases	1,048	102.21				1	1	.09	30.55	2.9
	20–59	Other general diseases	2,266	221.01		45	4.27	5	10	.95	120.70	11.7
		Diseases of the nervous system and organs of special sense	378	36.86		50	4.73		2	.19	15.22	1.4
	60–74	Of the nervous system	181	17.65		46	4.36	2	2	.19	10.13	.9
	75	Of the eye and its annexa	97	9.46		3	.28				2.82	.2
	76	Of the ear and its annexa	100	9.75		1	.09				2.26	.2
	77–85	Diseases of the circulatory system	295	28.77		2	.19	4	4	.38	12.20	1.1
	86–98	Diseases of the respiratory system	568	55.40		3	.28				14.72	1.4
	99–118	Diseases of the digestive system	1,938	189.00		4	.38	4	4	.38	44.37	4.3
	119–127	Diseases of the genito-urinary system	104	10.14	1	1	.09				3.39	.3
	142–145	Diseases of the skin and cellular tissue	753	73.44							18.77	1.8
	146–149	Diseases of the organs of locomotion	193	18.82		3	.28				9.31	.9
	150	Malformations, etc	54	5.27							1.71	.1
	189	Ill-defined diseases	58	5.66							1.85	.1
		Total for disease	7,655	746.61	1	108	10.24	16	21	1.99	272.78	26.6
	155–186	External causes	1,344	131.08		4	.38	19	19	1.80	40.79	3.9
		Total for disease and external causes	8,999	877.69	1	112	10.62	35	40	3.79	313.58	30.5

[1] Number of discharges and deaths which actually occurred.
[2] Number of discharges and deaths, including those of cases invalided home and deducted from th United States.

ratios per 1,000 of mean strength, for Philippine Islands, American troops, enlisted men, year 1914—Continued.

Philippine Islands, white, American, enlisted men.									Philippine Islands, colored, American, enlisted men.								
S. G. O., 8,375—A. G. O., 8,673.									S. G. O., 1,878—A. G. O., 1,878.								
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
		(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
1	0.12				2	2	0.23												
109	13.01				2	2	.23			7	3.73								
12	1.43									2	1.06								
5	.60				3	3	.35												
42	5.01									4	2.13								
1	.12																		
					2	2	.23								2	2	1.06		
13	1.55				2	2	.23			4	2.13								
1	.12									1	.53								
60	7.16					1	.12			18	9.58								
333	39.76		1	0.12	1	1	.12			50	26.62								
4	.48									2	1.06								
56	6.69									6	3.19								
98	11.70									1	.53								
33	3.94									3	1.60								
2	.24				4	4	.46												
365	43.58		1	.12	1	1	.12			101	53.78								
2,686	320.72		38	4.38	5	9	1.04	123.27	14.72	628	334.40		7	3.73	1	2	1.06	27.98	14.90
900	107.46				1	1	.12	27.41	3.27	148	78.81							3.15	1.67
1,786	213.25		38	4.38	4	8	.92	95.87	11.45	480	255.59		7	3.73	1	2	1.06	24.83	13.22
346	41.31		44	5.08	2	2	.23	13.63	1.62	32	17.04		6	3.19				1.50	.85
162	19.34		40	4.61	2	2	.23	8.73	1.04	19	10.12		6	3.19				1.40	.75
88	10.51		3	.35				2.70	.32	9	4.79							.12	.06
96	11.46		1	.12				2.19	.26	4	2.13							.07	.04
231	27.58		2	.23	3	3	.35	9.96	1.19	64	34.08				1	1	.53	2.24	1.19
497	59.34		3	.35				13.27	1.58	71	37.81							1.44	.77
1,680	200.60		4	.46	4	4	.46	40.17	4.80	258	137.38							4.20	2.24
86	10.27	1	1	.12				2.79	.33	18	9.58							.60	.32
652	77.84							16.41	1.96	101	53.78							2.36	1.26
151	18.03		2	.23				6.58	.79	42	22.36		1	.53				2.73	1.45
20	2.39							.78	.09	34	18.10							.93	.49
51	6.09							1.68	.20	7	3.73							.17	.09
6,400	764.18	1	94	10.84	14	18	2.08	228.54	27.29	1,255	668.26		14	7.45	2	3	1.60	44.24	23.56
1,142	136.36		4	.46	17	17	1.96	35.81	4.28	202	107.56				2	2	1.06	4.98	2.65
7,542	900.54	1	98	11.30	31	35	4.04	264.35	31.57	1,457	775.83		14	7.45	4	5	2.66	49.22	26.21

[1] Noneffectiveness for individual external causes not tabulated.

TABLE No. 73.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with Zone, and for Vera Cruz, Mexico*

Serial No.	International classification.	Causes of admission to sick report.	Alaska, officers and enlisted men. Mean strength 958. Admissions. Number.	Admissions. Ratio.	Discharges. Number. (1)	Discharges. Number. (2)	Discharges. Ratio.	Deaths. Number. (1)	Deaths. Number. (2)	Deaths. Ratio.	Noneffective. Number.	Noneffective. Ratio.
7–11	4	Malaria	2	2.09							0.04	0.04
7	.....	Estivo-autumnal fever	1	1.04							.03	.03
8	.....	Malarial cachexia										
9	.....	Quartan malarial fever										
10	.....	Tertian malarial fever										
11	.....	Undetermined malarial fever	1	1.04							.01	.01
13	5b	Vaccinia	1	1.04							.01	.01
14	6	Measles	1	1.04							.05	.05
15	7	Scarlet fever										
17	9	Diphtheria										
18	10	Influenza	23	24.01							.31	.33
21–23	14	Dysentery										
21	.....	Bacillary										
22	.....	Entamœbic										
23	.....	Unclassified										
27	18	Erysipelas	1	1.04							.04	.04
29	19b	Dengue										
31	19d	German measles	1	1.04							.03	.03
32	19e	Hemoglobinuric fever										
34	19g	Mumps	2	2.09							.09	.10
42–46	25	Mycoses	1	1.04							.03	.03
49–57	28–34	Tuberculosis, all	1	1.04				1	1	1.04	.31	.33
49–51	28	Tuberculosis of lungs	1	1.04				1	1	1.04	.31	.33
53–57	30–34	Tuberculosis of other organs										
59–74	37–38	Venereal diseases, all	20	20.88							.28	.29
59–64	37	Syphilis	4	4.18							.05	.05
65–67	38a	Soft chancre	2	2.09								
68–74	38b	Gonococcus infection	14	14.61							.23	.24
75–79	39–45	Cancer and other malignant tumors.										
80	46	Benign tumors										
81–85	47–48	Rheumatism, articular, all	4	4.18							.06	.06
81–82	47	Acute articular rheumatism	2	2.09							.04	.05
83–85	48	Chronic articular rheumatism	2	2.09							.01	.01
89	51	Exophthalmic goitre										
97–100	56	Alcoholism and results	16	16.70							.19	.19
108	61a	Epidemic cerebrospinal meningitis.										
110–115	63	Other diseases of spinal cord										
116	64	Cerebral hemorrhage, apoplexy										
120–126	67–68	Mental alienation	9	9.39		3	3.28				.94	.98
127	69	Epilepsy	1	1.04							.02	.03
129–133	73	Neuralgia and neuritis	4	4.18		2	2.09				.22	.23
138–141	75a	Conjunctivitis										
167	78	Acute endocarditis	2	2.09				1	1	1.04	.02	.03
169–174	79	Organic heart disease										
181	83b	Hemorrhoids	6	6.26							.11	.12
183	83d	Varicose veins										
184	83e	Varicocele										
185–187	84	Diseases of the lymphatic system										
193–199	86	Diseases of the nasal fossæ	2	2.09							.02	.02
200–202	87	Diseases of the larynx	3	3.13							.02	.02
203–204	88	Diseases of the thyroid body										
205–206	89–90	Bronchitis	19	19.83							.28	.29
207	91	Bronchopneumonia										
208	92	Pneumonia										
209–215	93	Pleurisy	3	3.13							.06	.07
216–217	94	Pulmonary congestion and pulmonary apoplexy										
219	96	Asthma										
224–227	99a	Diseases of the teeth and gums	3	3.13							.07	.07

[1] Number of discharges and deaths which actually occurred.

ratios per 1,000 of mean strength, for American troops serving in Alaska, Panama Canal (expeditionary forces), year 1914.

Panama Canal Zone, officers and enlisted men.									Expeditionary force, Vera Cruz, Mexico, officers and enlisted men.									
S. G. O., 2,076—A. G. O., 2,182.									2,402.									
Admissions.		Discharges			Deaths.			Non-effective.		Admissions.		Discharges.			Deaths.			Non-effective.	
Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
		(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
426	205.20							15.92	7.67	158	65.78				1	1	0.42	4.59	1.91
267	128.61							10.89	5.25	76	31.64				1	1	.42	2.24	.93
										1	.42							.06	.03
4	1.93							.12	.06										
97	46.72							3.14	1.51	78	32.47							2.09	.87
58	27.94							1.77	.85	3	1.25							.20	.08
										1	.42							.01	.00
2	.96							.11	.05	7	2.91							.33	.14
1	.48							.04	.02										
										2	.83							.12	.05
65	31.31							1.33	.64	6	2.50							.02	.01
										56	23.31				1	1	.42	2.56	1.07
										29	12.07				1	1	.42	1.49	.62
										10	4.16							.50	.21
										17	7.08							.57	.24
										2	.83							.05	.02
										10	4.16							.16	.07
										5	2.08							.13	.05
1	.48							.01	.00										
32	15.41							1.44	.70	4	1.67							.21	.09
5	2.41		1	0.48				.34	.16	12	5.00					1	.42	.52	.21
4	1.93		1	.48				.17	.08	12	5.00							.39	.16
1	.48							.16	.08									.13	.05
273	131.50							13.74	6.62	864	359.70							12.52	5.21
36	17.34							2.15	1.04	85	35.39							2.47	1.03
90	43.35							4.61	2.22	434	180.68							6.15	2.56
147	70.81							6.97	3.36	345	143.63							3.90	1.62
1	.48							.07	.04	1	.42					1	.42	.04	.01
7	3.37							.22	.11	5	2.08							.15	.06
9	4.34							.52	.25	11	4.59							.28	.12
7	3.38							.29	.14	8	3.34							.16	.07
2	.96							.23	.11	3	1.25							.12	.05
										2	.83							.16	.07
20	9.63							.16	.08	71	29.56			1 0.44	1	1	.42	.78	.32
										1	.42								
1	.48		1	.48				.18	.09	1	.42							.06	.03
										2	.83							.13	.06
14	6.74		6	2.85				1.88	.91	9	3.75		3	1.32				.24	.10
6	2.89							.55	.26	3	1.25		1	.44				.07	.03
7	3.37							.41	.20	6	2.50							.21	.09
9	4.33							.30	.14	1	.42							.01	.00
9	4.33		3	1.43				.64	.30	2	.83							.03	.01
29	13.97							1.04	.50	12	5.00							.22	.09
3	1.45							.15	.07	1	.42							.11	.04
10	4.82							1.04	.50	2	.83							.12	.05
46	22.16							3.07	1.48	31	12.91							1.72	.71
37	17.82							.64	.31	10	4.16							.17	.07
										2	.83							.02	.01
1	.48							.01	.00										
38	18.30							1.02	.49	85	35.39							2.12	.87
								.07	.03	6	2.50				1	1	.42	.40	.17
										2	.83							.04	.02
15	7.23							.64	.31	18	7.50							.65	.27
										1	.42							.01	.00
5	2.41		1	.48				.37	.18	4	1.67							.09	.04
20	9.63							.23	.11	1	.42							.01	.01

[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

TABLE NO. 73.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with Zone, and for Vera Cruz, Mexico*

Serial No.	International classification.	Causes of admission to sick report.	Alaska, officers and enlisted men.								
		Mean strength	958.								
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)			
228–231	99b	Other diseases of the mouth and annexa										
232–236	100	Diseases of the pharynx	49	51.16							0.79	0.83
238	102	Ulcer of stomach	1	1.04							.02	.02
239–244	103	Other diseases of stomach (cancer excepted)	7	7.31							.11	.11
245–253	105	Diarrhœa and enteritis	7	7.31							.05	.06
255–259	107	Intestinal parasites										
260	108	Appendicitis	12	12.53							.60	.63
261–263	109	Hernia	7	7.31		1	1.09				.64	.67
264–267	110a	Diseases of the anus and fecal fistula										
268–272	110b	Other diseases of the intestines	9	9.40							.25	.26
277–281	115	Other diseases of liver and gall bladder	3	3.13							.07	.07
288	119	Acute nephritis										
289–291	120	Bright's disease										
293–299	122	Other diseases of the kidney and annexa										
303–306	124b	Diseases of the bladder	1	1.04		1	1.09				.07	.07
304	124	Enuresis	1	1.04		1	1.09				.07	.07
307–309	125	Diseases of the urethra, urinary abscess, etc	1	1.04							.01	.01
313–319	127	Diseases of the male genital organs (nonveneral)	6	6.26							.11	.11
322–323	143	Furuncle and carbuncle	7	7.31							.10	.10
324–325	144	Acute abscess and cellulitis	5	5.22							.08	.09
352–357	146	Diseases of the bones	1	1.04							.09	.10
358–360	147	Diseases of the joints	3	3.13							.05	.05
367	149	Flat foot	1	1.04							.00	.00
372	150	Congenital malformations	7	7.31							.11	.11
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation										
379	189Ba	Under observation, undiagnosed and unknown	1	1.04							.00	.00
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[2]										
426–434	155–163	Suicides, all						1	1	1.04		
435	164	Poisoning by food	2	2.09								
436	165a	Venomous bites and stings										
437	165b	Other poisoning (deleterious gases excepted)										
439	167	Burns (conflagrations excepted)	2	2.09								
442	169	Drowning, accidental						2	2	2.09		
443	170	Traumatism by firearms (other than specified)	3	3.13								
444	170a	Shot by sentry or guard										
445	171	Traumatism by cutting or piercing instruments	3	3.13								
446	172	Traumatism by fall	42	43.84		1	1.09					
448	174	Traumatism by machines										
449	175	Traumatism by other crushing	2	2.09								
450	176	Injuries by animals	1	1.04								
452	178	Effects of excessive cold	4	4.18				2	2	2.09		
453	179	Effects of heat	1	1.04								
454	180	Effects of lightning										
455	181	Effects of electricity	1	1.04								
456–458	182–184	Homicides, all										
460	186	Other external violence	37	38.62								

[1] Number of discharges and deaths which actually occurred.
[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

ratios per 1,000 of mean strength, for American troops serving in Alaska, Panama Canal (expeditionary forces), year 1914—Continued.

Panama Canal Zone, officers and enlisted men.									Expeditionary force, Vera Cruz, Mexico, officers and enlisted men.								
S. G. O., 2,076—A. G. O., 2,182.									2,402.								
Admissions.		Discharges.			Deaths.			Non-effective.		Admissions.		Discharges.			Deaths.			Non-effective.	
Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
		(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
1	0.48							0.01	0.01										
118	56.83							2.15	1.03	59	24.57							0.77	0.32
1	.48							.17	.08	2	.83							.09	.04
30	14.46							.32	.16	20	8.33							.21	.09
32	15.41							.68	.33	189	78.68							2.64	1.10
1	.48							.00	.00	2	.83							.03	.01
45	21.68							2.79	1.34	19	7.91							1.16	.48
13	6.27		1	0.48				1.60	.77	8	3.33							.52	.22
1	.48							.01	.00										
44	21.20							.69	.33	31	12.92							.55	.24
11	5.29							.66	.32	14	5.83							.30	.12
4	1.93							.13	.06	1	.42							.03	.01
2	.96		1	.48		1	0.46	.16	.08	2	.84					1	.42	.09	.04
2	.96		1	.48				.30	.14										
3	1.44							.15	.07	1	.42							.04	.02
1	.48							.04	.02										
3	1.45							.22	.10										
6	2.89							.24	.12	5	2.09							.08	.03
31	14.93							.39	.18	37	15.41							.71	.29
24	11.56							.95	.46	34	14.15							.68	.28
3	1.44							.38	.18	7	2.92		1	0.44				.40	.16
9	4.33							1.22	.59	10	4.17							.19	.08
13	6.26		3	1.43				1.36	.66	3	1.25		1	.44				.20	.08
4	1.93							.11	.05										
										30	12.49							.41	.17
										4	1.67							.05	.02
					1	1	.46			1	.42				2	2	.83		
4	1.93									2	.83								
11	5.30									9	3.75								
										1	.42								
10	4.82									12	5.00								
					2	2	.92								2	2	.83		
3	1.45	1	2	.95						4	1.67								
										1	.42								
28	13.49									31	12.91								
70	33.67									37	15.40				1	1	.42		
1	.48																		
21	10.12				3	3	1.37			10	4.16								
3	1.45									15	6.24								
2	.96									3	1.25								
										1	.42								
															1	1	.42		
90	43.36									63	26.23				1	1	.42		

[1] Noneffectiveness for individual external causes not tabulated.

TABLE No. 73.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with Zone, and for Vera Cruz, Mexico*

Serial No.	International classification.	Causes of admission to sick report.	Alaska, officers and enlisted men.									
		Mean strength	958.									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)			
		DISEASES AND INJURIES GROUPED.										
		General diseases	74	77.24	.....	.....	.....	1	1	1.04	1.44	1.51
1–19		Epidemic diseases	32	33.40	.....	.....	.....	.....	.....	.....	.57	.60
20–59		Other general diseases	42	43.84	.....	.....	.....	1	1	1.04	.87	.91
		Diseases of the nervous system and organs of special sense	29	30.27	.....	5	5.46	.....	.....	.....	1.78	1.86
60–74		Of the nervous system	17	17.75	.....	5	5.46	.....	.....	.....	1.24	1.29
75		Of the eye and its annexa	9	9.39	.....	.....	.....	.....	.....	.....	.35	.37
76		Of the ear and its annexa	3	3.13	.....	.....	.....	.....	.....	.....	.19	.20
77–85		Diseases of the circulatory system	8	8.35	.....	.....	.....	1	1	1.04	.14	.14
86–98		Diseases of the respiratory system	27	28.18	.....	.....	.....	.....	.....	.....	.39	.40
99–118		Diseases of the digestive system	98	102.30	.....	1	1.09	.....	1	1.04	2.60	2.71
119–127		Diseases of the genito-urinary system	8	8.35	.....	1	1.09	.....	.....	.....	.19	.20
142–145		Diseases of the skin and cellular tissue	18	18.79	.....	.....	.....	.....	.....	.....	.26	.27
146–149		Diseases of the organs of locomotion	21	21.92	.....	.....	.....	.....	.....	.....	.33	.35
150		Malformations, etc	7	7.31	.....	.....	.....	.....	.....	.....	.11	.11
189		Ill-defined diseases	1	1.04	.....	.....	.....	.....	.....	.....	.00	.00
		Total for disease	291	303.76	.....	7	7.65	2	3	3.13	7.24	7.55
155–186		External causes	100	104.38	.....	1	1.09	5	5	5.22	2.51	2.62
		Total for diseases and external causes	391	408.14	.....	8	8.74	7	8	8.35	9.74	10.17

[1] Number of discharges and deaths which actually occurred.

ratios per 1,000 of mean strength, for American troops serving in Alaska, Panama Canal (expeditionary forces), year 1914—Continued.

Panama Canal Zone, officers and enlisted men.									Expeditionary force, Vera Cruz, Mexico, officers and enlisted men.									
S. G. O., 2,076—A. G. O., 2,182.									2,402.									
Admissions.		Discharges.			Deaths.			Non-effective.		Admissions.		Discharges.			Deaths.			Non-effective.	
		Number.			Number.							Number.			Number.				
Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.	Number.	Ratio.	(1)	(2)	Ratio.	(1)	(2)	Ratio.	Number.	Ratio.
853	410.89	.....	1	0.48	...	...	.....	34.26	16.51	1,221	508.33	...	1	0.44	3	5	2.08	22.78	9.48
527	253.85	.....	.....	.....	...	...	.....	18.86	9.08	252	104.91	...	.....	.....	2	2	.83	8.19	3.41
326	157.04	.....	1	.48	...	...	.....	15.41	7.42	969	403.41	...	1	.44	1	3	1.25	14.59	6.07
124	59.73	.....	8	3.81	...	...	.....	6.25	3.01	56	23.32	...	5	2.21	...	...	.....	1.26	.53
37	17.82	.....	7	3.33	...	...	.....	3.68	1.77	27	11.24	...	4	1.77	...	...	.....	.78	.33
25	12.04	.....	.....	.....	...	...	.....	.89	.43	12	5.00	...	.....	.....	...	...	.....	.27	.11
62	29.87	1	1	.48	...	...	.....	1.68	.81	17	7.08	...	1	.44	...	...	.....	.21	.09
99	47.69	.....	3	1.43	...	...	.....	5.97	2.88	55	22.90	...	.....	.....	...	...	.....	2.63	1.09
96	46.25	.....	1	.48	...	...	.....	2.73	1.32	128	53.29	...	.....	.....	1	1	.42	3.49	1.45
317	152.70	.....	1	.48	...	...	.....	9.32	4.49	346	144.05	...	.....	.....	...	...	.....	6.30	2.62
24	11.56	.....	2	.95	...	1	0.46	1.30	.62	9	3.75	...	...	.....	...	1	.42	.23	.10
129	62.14	.....	.....	.....	...	...	.....	3.32	1.60	112	46.63	...	.....	.....	...	...	.....	2.49	1.04
54	26.01	.....	3	1.43	...	...	.....	4.36	2.10	52	21.65	...	2	.88	...	...	.....	1.41	.59
4	1.93	.....	.....	.....	...	...	.....	.11	.05	.....	.....	...	.....	.....	...	...	.....	.....	.....
.....	.....	.....	.....	.....	...	...	.....	.....	.....	35	14.57	...	.....	.....	...	...	.....	.49	.20
1,700	818.88	1	19	9.04	...	1	.46	67.62	32.57	2,014	838.47	...	8	3.53	4	7	2.91	41.07	17.10
248	119.46	1	4	1.90	6	6	2.75	8.05	3.88	193	80.35	...	.....	.....	7	7	2.91	5.85	2.44
1,948	938.35	2	23	10.94	6	7	3.21	75.67	36.45	2,207	918.82	...	8	3.53	11	14	5.83	46.93	19.54

[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States

TABLE NO. 74.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for American troops, total officers and enlisted men, and separately for white and colored troops serving in Hawaii, year 1914.*

Serial Nos.	International classification.	Causes of admission to sick report.	Hawaii, officers and enlisted men.								Hawaii, enlisted men.							
		Mean strength	S. G. O., 8,268—A. G. O., 8,293.								S. G. O., 7,971—A. G. O., 7,980.							
			Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
2	1a	Paratyphoid fever	1	0.12	....	....	.....	.....	.....	.....	0.14	0.02	1	0.13	....	....	.....	.....	.....	.....	0.14	0.02
7–11	4	Malaria	11	1.33	....	....	.....	.....	.....	.....	.25	.03	10	1.25	....	....	.....	.....	.....	.....	.25	.03
10	.....	Tertian malarial fever	11	1.33	....	....	.....	.....	.....	.....	.25	.03	10	1.25	....	....	.....	.....	.....	.....	.25	.03
14	6	Measles	49	5.93	....	....	.....	.....	.....	.....	2.76	.33	49	6.15	....	....	.....	.....	.....	.....	2.76	.35
17	9	Diphtheria	4	.48	....	....	.....	.....	.....	.....	.90	.11	4	.50	....	....	.....	.....	.....	.....	.90	.11
18	10	Influenza	235	28.42	....	....	.....	.....	.....	.....	4.61	.55	213	26.72	....	....	.....	.....	.....	.....	4.40	.55
27	18	Erysipelas	3	.36	....	....	.....	.....	.....	.....	.13	.02	3	.38	....	....	.....	.....	.....	.....	.13	.02
34	19g	Mumps	83	10.04	....	....	.....	.....	.....	.....	4.19	.51	82	10.29	....	....	.....	.....	.....	.....	4.15	.52
37	20	Purulent infection and septicemia	2	.24	....	....	.....	2	2	0.24	.02	.00	2	.25	....	....	.....	2	2	0.25	.02	.00
49–57	28–34	Tuberculosis, all	25	3.02	....	15	1.88	....	4	.48	1.94	.23	24	3.01	....	15	1.88	....	4	.50	1.87	.23
49–51	28	Tuberculosis of lungs	21	2.54	....	13	1.63	....	3	.36	1.56	.19	21	2.63	....	13	1.63	....	3	.38	1.56	.20
53–57	30–34	Tuberculosis of other organs.	4	.48	....	2	.26	....	1	.12	.38	.05	3	.38	....	2	.26	....	1	.13	.31	.04
58	36	Scoliosis (rickets)	1	.12	....	1	.13	.....	.....	.....	.23	.03	1	.13	....	1	.13	.....	.....	.....	.23	.03
59–74	37–38	Venereal diseases, all	538	65.07	....	5	.63	....	1	.12	28.22	3.41	537	67.37	....	5	.63	....	1	.13	28.17	3.53
59–64	37	Syphilis	150	18.14	....	4	.50	....	1	.12	10.07	1.22	149	18.69	....	4	.50	....	1	.13	10.03	1.26
65–67	38a	Soft chancre	64	7.74	.....	.....	.....	.....	.....	.....	3.04	.37	64	8.03	.....	.....	.....	.....	.....	.....	3.04	.38
68–74	38b	Gonococcus infection	324	39.19	....	1	.13	.....	.....	.....	15.10	1.83	324	40.65	....	1	.13	.....	.....	.....	15.10	1.89
80	46	Benign tumors	17	2.06	.....	.....	.....	.....	.....	.....	1.06	.13	17	2.13	.....	.....	.....	.....	.....	.....	1.06	.13
81–85	47–48	Rheumatism, articular, all	22	2.66	.....	.....	.....	.....	.....	.....	1.72	.21	21	2.64	.....	.....	.....	.....	.....	.....	1.71	.22
81–82	47	Acute articular rheumatism	14	1.69	.....	.....	.....	.....	.....	.....	.76	.09	13	1.63	.....	.....	.....	.....	.....	.....	.76	.10
83–85	48	Chronic articular rheumatism	8	.97	.....	.....	.....	.....	.....	.....	.95	.12	8	1.01	.....	.....	.....	.....	.....	.....	.95	.12
89	51	Exophthalmic goitre	1	.12	.....	.....	.....	.....	.....	.....	.06	.01	1	.13	.....	.....	.....	.....	.....	.....	.06	.01
97–100	56	Alcoholism and results	96	11.61	....	1	.13	.....	.....	.....	1.14	.14	96	12.04	....	1	.13	.....	.....	.....	1.14	.14

103-104	59	Other chronic poisoning, including drug habit	4	.48					.01	.00	4	.51						.01	.00
108	61a	Epidemic cerebrospinal meningitis	1	.12	2	.25			.16	.02	1	.13	2	.25				.16	.02
117-119	66	Paralysis without specified cause	2	.24					.08	.01	2	.25						.08	.01
120-126	67-68	Mental alienation	30	3.63	21	2.64			2.83	.34	30	3.77	21	2.64				2.83	.35
127	69	Epilepsy	4	.48					.34	.04	4	.50						.34	.04
129-133	73	Neuralgia and neuritis	27	3.27	4	.50			1.14	.14	25	3.14	4	.50				.91	.11
138-141	75a	Conjunctivitis	27	3.26					.48	.06	24	3.02						.46	.06
166	77	Pericarditis	1	.12					.07	.01	1	.13						.07	.01
169-174	79	Organic heart disease	11	1.33	2	.26			1.36	.16	10	1.26	2	.26				1.33	.16
176-177	81	Diseases of the arteries, atheroma, aneurism, etc	4	.48			2	2	.09	.01	4	.50			1	1	.13	.09	.01
181	83b	Hemorrhoids	56	6.77					1.83	.22	53	6.65						1.73	.22
183	83d	Varicose veins	4	.48					.36	.04	4	.50						.36	.05
184	83e	Varicocele	27	3.27					1.72	.21	27	3.39						1.72	.22
185-187	84	Diseases of the lymphatic system	24	2.90					.89	.10	24	3.01						.89	.11
193-199	86	Diseases of the nasal fossæ	37	4.47	1	.13			.99	.13	32	4.03	1	.13				.96	.12
200-202	87	Diseases of the larynx	5	.60					.06	.01	5	.63						.06	.01
203-204	88	Diseases of the thyroid body	2	.24					.03	.00	2	.26						.03	.00
205-206	89-90	Bronchitis	270	32.65					5.67	.69	262	32.87						5.58	.70
207	91	Bronchopneumonia	3	.36			1	1	.12	.34	.04	3	.38			1	1	.13	.34	.04
208	92	Pneumonia	6	.73						.94	.11	6	.75						.94	.12
209-215	93	Pleurisy	8	.97						.39	.04	8	1.01						.39	.05
219	96	Asthma	15	1.81	2	.25				.82	.10	15	1.88	2	.25				.82	.10
222	98b	Hay fever	1	.12						.01	.00	1	.13						.01	.00
224-227	99a	Diseases of the teeth and gums	43	5.19	1	.13				.84	.10	41	5.15	1	.13				.82	.10
228-231	99b	Other diseases of the mouth and annexa	4	.48						.09	.01	4	.51						.09	.01
232-236	100	Diseases of the pharynx	231	27.94						3.84	.47	223	27.97						3.71	.47
238	102	Ulcer of stomach	2	.24						.27	.03	2	.25						.27	.03
239-244	103	Other diseases of stomach (cancer excepted)	65	7.85						2.26	.16	61	7.66						2.19	.26
245-253	105	Diarrhea and enteritis	222	26.85						3.04	.37	212	26.60						2.98	.37
254	106	Ankylostomiasis	1	.12						.13	.02	1	.13						.13	.02
255-259	107	Intestinal parasites	11	1.33						.24	.03	11	1.38						.24	.03
260	108	Appendicitis	57	6.89						4.49	.54	55	6.90						4.20	.53
261-263	109	Hernia	34	4.11						4.21	.51	34	4.27						4.03	.50
264-267	110a	Diseases of the anus and fecal fistula	6	.72						.44	.05	6	.76						.44	.05
268-272	110b	Other diseases of the intestines	166	20.08						2.01	.15	159	19.95						1.97	.24

[1] Number of discharges and deaths which actually occurred.
[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

TABLE No. 74.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for American troops, total officers and enlisted men, and separately for white and colored troops serving in Hawaii, year 1914*—Continued.

Serial Nos.	International classification.	Causes of admission to sick report.	Hawaii, officers and enlisted men.										Hawaii, enlisted men.									
		Mean strength	S. G. O., 8,268—A. G. O., 8,293.										S. G. O., 7,971—A. G. O., 7,980.									
			Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
277–281	115	Other diseases of liver and gall bladder	15	1.81							0.85	0.11	15	1.89							0.85	0.11
288	119	Acute nephritis	6	.73							.45	.05	5	.63							.41	.05
289–291	120	Bright's disease	9	1.08		4	0.51				1.46	.18	8	.01		4	0.51				1.36	.17
293–299	122	Other diseases of the kidney and annexa	1	.12							.18	.02										
303–306	124	Diseases of the bladder	16	1.94		1	.13				.76	.09	15	1.88		1	.13				.73	.10
304	124b	Enuresis	8	.97		1	.13						8	1.00		1	.13				.28	.04
307–309	125	Diseases of the urethra, urinary abscess, etc	20	2.42							.36	.04	20	2.51							.36	.05
310–312	126	Diseases of the prostate	1	.12							.04	.01	1	.13							.04	.01
313–319	127	Diseases of the male genital organs (non-venereal)	38	4.58							1.12	.13	37	4.64							1.07	.13
322–323	143	Furuncle and carbuncle	191	23.10							3.01	.37	186	23.34							2.93	.37
324–325	144	Acute abscess and cellulitis	82	9.92							2.48	.30	77	9.66							2.37	.29
352–357	146	Diseases of the bones	20	2.42		2	.26				1.75	.20	20	2.52		2	.26				1.49	.18
358–360	147	Diseases of the joints	31	3.75							1.77	.22	27	3.39							1.29	.16
367	149g	Flat foot	4	.48									4	.50							.36	.05
372	150	Congenital malformations	19	2.30							.61	.07	19	2.38							.61	.08
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	11	1.33							.19	.02	11	1.38							.19	.02
379	189Ba	Under observation, undiagnosed and unknown	15	1.81							.88	.11	13	1.63							.85	.11
380	189Bb	Malingering	6	.73							.62	.07	6	.75							.62	.08

		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[3]																				
426–434	155–163	Suicides, all					1	1	0.12			2	0.25									
435	164	Poisoning by food	2	.24																		
436	165a	Venomous bites and stings	5	.60								5	.63									
437	165b	Other poisoning (deleterious gases excepted)	3	.36			2	2	.24			3	.38				2	2	.25			
439*	167	Burns (conflagrations excepted)	29	3.51								27	3.39									
441	168a	Suffocation, strangulation	1	.12								1	.13									
442	169	Drowning, accidental					1	1	.12								1	1	.13			
443	170	Traumatism by firearms (other than specified)	19	2.30		2	.25					19	2.38		2	.25						
445	171	Traumatism by cutting or piercing instruments	107	12.94								104	13.05									
446	172	Traumatism by fall	334	40.40		1	.13					323	40.52		1	.13						
448	174	Traumatism by machines	8	.97								7	.88									
449	175	Traumatism by other crushing	91	11.01				1	1	.12		91	11.42				1	1	.13			
450	176	Injuries by animals	71	8.59																		
453	179	Effects of heat	14	1.69								14	1.76									
460	186	Other external violence	298	36.04		3	.38					285	35.75		3	.38						
		DISEASES AND INJURIES GROUPED.																				
		General diseases	1,099	132.92		22	2.76	2	7	.84	47.87	5.79	1,072	134.49		22	2.76	2	7	.88	47.50	5.96
	1–19	Epidemic diseases	391	47.29							13.20	1.60	367	46.04							12.95	1.63
	20–59	Other general diseases	708	85.63		22	2.76	2	7	.84	34.67	4.19	705	88.45		22	2.76	2	7	.88	34.55	4.33
		Diseases of the nervous system and organs of special sense	174	21.05		27	3.38				7.69	.93	161	20.20		27	3.38				7.25	.91
	60–74	Of the nervous system	72	8.71		27	3.38				5.09	.62	69	8.66		27	3.38				4.77	.60
	75	Of the eye and its annexa	73	8.83							1.59	.19	65	8.15							1.53	.19
	76	Of the ear and its annexa	29	3.51							1.01	.12	27	3.39							.95	.12

[1] Number of discharges and deaths which actually occurred.
[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.
[3] Noneffectiveness for individual external causes not tabulated.

TABLE NO. 74.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for American troops, total officers and enlisted men, and separately for white and colored troops serving in Hawaii, year 1914*—Continued.

Serial Nos.	International classification.	Causes of admission to sick report.	Hawaii, officers and enlisted men.										Hawaii, enlisted men.									
		Mean strength.....	S. G. O., 8,268—A. G. O., 8,293.										S. G. O., 7,971—A. G. O., 7,980.									
			Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
		DISEASES AND INJURIES GROUPED—contd.																				
	77–85	Diseases of the circulatory system.....	131	15.84	....	2	0.25	2	2	0.24	6.47	0.78	126	15.81	....	2	0.25	1	1	0.13	6.32	0.79
	86–98	Diseases of the respiratory system.....	347	41.97	....	3	.38	1	1	.12	9.25	1.12	334	41.90	....	3	.38	1	1	.13	9.13	1.14
	99–118	Diseases of the digestive system.....	857	103.65	....	1	.13	....	....	.....	22.70	2.75	824	103.37	....	1	.13	....	....	.....	21.92	2.75
	119–127	Diseases of the genito-urinary system.....	93	11.25	....	5	.63	....	....	.....	4.40	.53	88	11.04	....	5	.63	....	....	.....	3.98	.50
	142–145	Diseases of the skin and cellular tissue.....	404	48.87	....	....	.....	....	....	.....	9.41	1.14	391	49.05	....	....	.....	....	....	.....	9.15	1.15
	146–149	Diseases of the organs of locomotion.....	169	20.44	....	3	.38	....	....	.....	7.51	.91	157	19.70	....	3	.38	....	....	.....	6.65	.83
	150	Malformations, etc.....	19	2.30	....	....	.....	....	....	.....	.61	.07	19	2.38	....	....	.....	....	....	.....	.61	.08
	189	Ill-defined diseases.....	34	4.11	....	....	.....	....	....	.....	1.72	.21	32	4.01	....	....	.....	....	....	.....	1.69	.21
		Total for disease..	3,327	402.39	....	63	7.89	5	10	1.21	117.65	14.23	3,204	401.96	....	63	7.89	4	9	1.13	114.20	14.33
	155–186	External causes.....	1,002	121.19	....	9	1.13	5	5	.60	36.85	4.46	967	121.31	....	9	1.13	4	4	.50	35.24	4.42
		Total for diseas and external causes.....	4,329	523.58	....	72	9.02	10	15	1.81	154.50	18.69	4,171	523.27	....	72	9.02	8	13	1.63	149.44	18.75

Number of discharges and deaths which actually occurred.
[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States

Serial Nos.	International classification.	Causes of admission to sick report.	Hawaii, enlisted men, white. Mean strength..... S. G. O., 6,252—A. G. O., 6,261.										Hawaii, enlisted men, colored. S. G. O., 1,719—A. G. O., 1,719.							
			Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.	Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
2	1a	Paratyphoid fever	1	0.16	....	....	.....	....	....	.....	0.14	0.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7-11	4	Malaria	9	1.44	....	....	.....	....	....	.....	.22	.04	1	0.58	....	....	.....	....	....	.....	0 03	0.02
10	.....	Tertian malarial fever	9	1.44	....	....	.....	....	....	.....	.22	.04	1	.58	....	....	.....	....	....	.....	.03	.02
14	6	Measles	39	6.24	....	....	.....	....	....	.....	2.31	.37	10	5.82	....	....	.....	....	....	.....	.45	.26
17	9	Diphtheria	4	.64	....	....	.....	....	....	.....	.90	.14	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
18	10	Influenza	131	28.95	....	....	.....	....	....	.....	3.69	.59	32	18.62	....	....	.....	....	....	.....	.72	.42
27	18	Erysipelas	3	.48	....	....	.....	....	....	.....	.05	.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
34	19g	Mumps	78	12.48	....	....	.....	....	....	.....	4.02	.64	4	2.33	....	....	.....	....	....	.....	.13	.07
37	20	Purulent infection and septicemia	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2	1.16	....	....	.....	2	2	1.16	.02	.01
49-57	28-34	Tuberculosis, all	20	3.20	....	12	1.92	....	2	0.32	1.35	22	4	2.33	....	3	1.75	....	2	1.16	.52	.30
49-51	28	Tuberculosis of lungs	18	2.88	....	10	1.60	....	2	.32	1.18	.19	3	1.75	....	3	1.75	....	1	.58	.38	.22
53-57	30-34	Tuberculosis of other organs	2	.32	....	2	.32	....	....	.....	.17	.02	1	.58	....	....	.....	....	1	.58	.14	.08
58	36	Scoliosis (rickets)	1	.16	....	1	.16	.....	.....	.....	.....	.04	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
59-74	37-38	Venereal diseases, all	376	60.14	....	4	.64	....	....	.....	18.51	2.96	161	93.66	....	1	.58	....	1	.58	9.66	5.62
59-64	37	Syphilis	100	16.00	....	3	.48	....	....	.....	5.44	.87	49	28.50	....	1	.58	....	1	.58	4.59	2.67
65-67	38a	Soft chancre	44	7.04	.....	.....	.....	.....	.....	.....	1.99	.32	20	11.63	.....	.....	.....	.....	.....	.....	1.05	.61
68-74	38b	Gonococcus infection	232	37.11	....	1	.16	.....	.....	.....	11.08	1.77	92	53.52	.....	.....	.....	.....	.....	.....	4.02	2.34
80	46	Benign tumors	11	1.76	.....	.....	.....	.....	.....	.....	.58	.09	6	3.49	.....	.....	.....	.....	.....	.....	.49	.28
81-85	47-48	Rheumatism, articular, all	14	2.24	.....	.....	.....	.....	.....	.....	1.41	.23	7	4.07	.....	.....	.....	.....	.....	.....	.30	.18
81-82	47	Acute articular rheumatism	7	1.12	.....	.....	.....	.....	.....	.....	.47	.08	6	3.49	.....	.....	.....	.....	.....	.....	.28	.17
83-85	48	Chronic articular rheumatism	7	1.12	.....	.....	.....	.....	.....	.....	.93	.15	1	.58	.....	.....	.....	.....	.....	.....	.02	.01

[1] Number of discharges and deaths which actually occurred.
[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

TABLE No. 74.—*Admissions to sick report, discharges, deaths, and nonaffectiveness, with ratios per 1,000 of mean strength for America troops, total officers and enlisted men, and separately for white and colored troops serving in Hawaii, year 1914*—Continued.

Serial Nos.	International classification.	Causes of admission to sick report.	Hawaii, enlisted men, white.										Hawaii, enlisted men, colored.									
		Mean strength	S. G. O., 6,252—A. G. O., 6,261.										S. G. O., 1,719—A. G. O., 1,719.									
			Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
89	51	Exophthalmic goitre	1	0.16							0.06	0.01										
97–100	56	Alcoholism and results	82	13.11		1	0.16				1.04	.17	14	8.14							0.10	9.06
103–104	59	Other chronic poisoning, including drug habit	4	.64							.04	.01										
108	61a	Epidemic cerebrospinal meningitis	1	.16		2	.32				.16	.03										
117–119	66	Paralysis without specified cause	2	.32							.08	.01										
120–126	67–68	Mental alienation	24	3.84		18	2.87				2.32	.37	6	3.49		3	1.75				.52	.30
127	69	Epilepsy	3	.48							.15	.02	1	.58							.18	.11
129–133	73	Neuralgia and neuritis	21	3.36		2	.32				.73	.12	4	2.33		2	1.16				.18	.11
138–141	75a	Conjunctivitis	14	2.24							.25	.04	10	5.82							.20	.12
166	77	Pericarditis											1	.58							.07	.04
169–174	79	Organic heart disease	8	1.28		2	.32				.98	.16	2	1.16							.35	.20
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc	1	.16							.05	.01	3	1.75				1	1	0.58	.04	.03
181	83b	Hemorrhoids	32	5.12							1.02	.16	21	12.22							.71	.41
183	83d	Varicose veins	4	.64							.36	.06										
184	83e	Varicocele	24	3.84							1.50	.24	3	1.75							.22	.13
185–187	84	Diseases of the lymphatic system	20	3.20							.79	.13	4	2.33							.10	.06
193–199	86	Diseases of the nasal fasse	31	4.96		1	.16				.95	.15	1	.58							.01	.00
200–202	87	Diseases of the larynx	3	.48							.03	.01	2	1.16							.03	.02
203–204	88	Diseases of the thyroid body	2	.32							.03	.00										
205–206	89–90	Bronchitis	210	33.59							4.49	.72	52	30.25							1.09	.63

207	91	Bronchopneumonia	2	.32				1	1	0.32	.14	.02	1	.58						.20	.12
208	92	Pneumonia	5	.80							.77	.12	1	.58						.17	.10
209-215	93	Pleurisy	7	1.12							.27	.04	1	.58						.12	.07
219	96	Asthma	8	1.28		2	.32				.60	.10	7	4.07						.22	.13
222	98b	Hay fever	1	.16							.01	.00									
224-227	99a	Diseases of the teeth and gums	35	5.60							.69	.11	6	3.49		1	.58			.12	.07
228-231	99b	Other diseases of the mouth and annexa	3	.48							.02	.00	1	.58						.07	.04
232-236	100	Diseases of the pharynx	165	26.39							3.01	.48	58	33.74						.70	.41
238	102	Ulcer of stomach	2	.32							.27	.04									
239-244	103	Other diseases of stomach (cancer excepted)	48	7.68							1.83	.29	13	7.56						.36	.21
245-253	105	Diarrhea and enteritis	181	28.95							2.52	.40	31	18.03						.46	.27
254	106	Ankylostomiasis	1	.16							.13	.02									
255-259	107	Intestinal parasites	11	1.76							.24	.04									
260	108	Appendicitis	50	8.00							3.64	.58	5	2.91						.56	.33
261-263	109	Hernia	26	4.16							3.08	.49	8	4.65						.95	.55
264-267	110a	Diseases of the anus and fecal fistula	4	.64							.28	.05	2	1.16						.15	.09
268-272	110b	Other diseases of the intestines	106	16.96							1.40	.22	53	30.83						.56	.33
277-281	115	Other diseases of liver and gall bladder	15	2.40							.85	.14									
288	119	Acute nephritis	5	.80							.41	.07									
289-291	120	Bright's disease	7	1.12		3	.48				1.12	.18	1	.58		1	.58			.23	.14
303-306	124	Diseases of the bladder	11	1.76							.62	.10	4	2.33						.11	.06
304	124b	Enuresis	7	1.12		1	.16				.27	.04	1	.58						.01	.01
307-309	125	Diseases of the urethra, urinary abscess, etc	12	1.92							.18	.03	8	4.65						.19	.11
310-312	126	Diseases of the prostate											1	.58						.04	.02
313-319	127	Diseases of the male genital organs (non-venereal)	31	4.96							.78	.12	6	3.49						.29	.17
322-323	143	Furuncle and carbuncle	164	26.23							2.55	.40	22	12.80						.38	.22
324-325	144	Acute abscess and cellulitis	65	10.40							1.72	.27	12	6.99						.65	.38
352-357	146	Diseases of the bones	14	2.24		2	.32				.66	.11	6	3.49						.84	.49
358-360	147	Diseases of the joints	19	3.04							1.02	.16	8	4.65						.27	.15
367	149g	Flat foot	2	.32							.07	.01	2	1.16						.30	.17
372	150	Congenital malformations	16	2.56							.55	.09	3	1.75						.06	.04
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	4	.64							.06	.01	7	4.07						.13	.08
379	189Ba	Under observation, undiagnosed and unknown	7	1.12							.65	.10	6	3.49						.19	.11
380	189Bb	Malingering	3	.48							.29	.05	3	1.75						.33	.19

[1] Number of discharges and deaths which actually occurred.
[2] Number of discharges and deaths, including those of cases invalided home and deaths occurring from the United States.

TABLE No. 74.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength, for American troops, total officers and enlisted men, and separately for white and colored troops serving in Hawaii, year 1914*—Continued.

Serial Nos.	International classification.	Causes of admission to sick report.	Hawaii, enlisted men, white.								Hawaii, enlisted men, colored.							
		Mean strength	S. G. O., 6,252—A. G. O., 6,261.								S. G. O., 1,719—A. G. O., 1,719.							
			Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)						(1)	(2)		(1)	(2)			
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[3]																			
435	164	Poisoning by food	2	0.32																	
436	165a	Venomous bites and stings	4	.64									1	0.58							
437	165b	Other poisoning (deleterious gases excepted)	2	.32				2	2	0.32			1	.58							
439	167	Burns (conflagrations excepted)	26	4.16									1	.58							
441	168a	Suffocation, strangulation	1	.16																	
442	169	Drowning, accidental						1	1	.16											
443	170	Traumatism by firearms (other than specified)	10	1.60		2	0.32						9	5.24							
445	171	Traumatism by cutting or piercing instruments	90	14.40									14	8.14							
446	172	Traumatism by fall	257	41.11		1	.16						66	38.39							
448	174	Traumatism by machines	5	.80									2	1.16							
449	175	Traumatism by other crushing	85	13.60				1	1	.16			6	3.49							
450	176	Injuries by animals	68	10.88																	
453	179	Effects of heat	14	2.24																	
460	186	Other external violence	225	35.99		2	.32						60	34.90		1	0.58				

	DISEASES AND INJURIES GROUPED.																		
	General diseases	831	132.92	....	18	2.87	....	2	.32	35.09	5.61	241	140.20	....	4	2.33	2	5	2.91	12.41	7.22
1–19	Epidemic diseases	320	51.19	....	....	.....	....	....	.....	11.63	1.86	47	27.34	....	....	.....	....	....	.....	1.32	.77
20–59	Other general diseases	511	81.74	....	18	2.87	....	2	.32	23.46	3.75	194	112.86	....	4	2.33	2	5	2.91	11.09	6.45
	Diseases of the nervous system and organs of special sense	125	20.00	....	22	3.51	....	....	.....	5.52	.88	36	20.94	....	5	2.91	....	....	.....	1.74	1.01
60–74	Of the nervous system	56	8.96	....	22	3.51	....	....	.....	3.61	.58	13	7.56	....	5	2.91	....	....	.....	1.16	.67
75	Of the eye and its annexa	44	7.01	....	....	.....	....	....	.....	1.12	.18	21	12.22	....	....	.....	....	....	.....	.41	.24
76	Of the ear and its annexa	25	4.00	....	....	.....	....	....	.....	.78	.12	2	1.16	....	....	.....	....	....	.....	.16	.10
77–85	Diseases of the circulatory system	92	14.72	....	2	.32	....	....	.....	4.83	.77	34	19.78	....	....	.....	1	1	.58	1.49	.87
86–98	Diseases of the respiratory system	269	43.03	....	3	.48	1	1	.16	7.29	1.17	65	37.81	....	....	.....	....	....	.....	1.83	1.07
99–118	Diseases of the digestive system	647	103.49	....	....	.....	....	....	.....	17.98	2.88	177	102.97	....	1	.58	....	....	.....	3.94	2.29
119–127	Diseases of the genito-urinary system	67	10.72	....	4	.64	....	....	.....	3.12	.50	21	12.22	....	1	.58	....	....	.....	.87	.51
142–145	Diseases of the skin and cellular tissue	327	52.31	....	....	.....	....	....	.....	7.20	1.15	64	37.23	....	....	.....	....	....	.....	1.95	1.13
146–149	Diseases of the organs of locomotion	113	18.07	....	3	.48	....	....	.....	4.09	.65	44	25.60	....	....	.....	....	....	.....	2.56	1.49
150	Malformations, etc	16	2.56	....	....	.....	....	....	.....	.55	.09	3	1.75	....	....	.....	....	....	.....	.06	.04
189	Ill-defined diseases	14	2.24	....	....	.....	....	....	.....	1.00	.16	18	10.47	....	....	.....	....	....	.....	.69	.40
	Total for disease	2,501	400.03	....	52	8.30	1	3	.16	86.66	13.86	703	408.96	....	11	6.40	3	6	3.49	27.53	16.02
155–186	External causes	801	128.12	....	6	.96	4	4	.64	29.45	4.71	166	96.57	....	3	1.75	....	....	.....	5.79	3.37
	Total for disease and external causes	3,302	528.15	....	58	9.26	5	7	1.12	116.11	18.57	869	505.53	....	14	8.14	3	6	3.49	33.33	19.39

[1] Number of discharges and deaths which actually occurred.
[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.
[3] Noneffectiveness for individual external causes not tabulated.

TABLE No. 75.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with in China, for native troops in Porto Rico*

Serial Nos.	International classification.	Causes of admission to sick report.	China, total, officers and enlisted men.									
		Mean strength	1,091									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)			
1	1	Typhoid fever									0.02	0.02
2	1a	Paratyphoid fever										
5	.....	Typhus fever	1	0.92							.12	.11
7–11	4	Malaria	24	22.00							.31	.29
7	.....	Estivo-autumnal fever	2	1.83							.02	.02
8	.....	Malarial cachexia										
9	.....	Quartan-malarial fever										
10	.....	Tertian malarial fever	22	20.16							.29	.27
11	.....	Undetermined malarial fever										
12	5	Smallpox and varioloid										
13	5b	Vaccinia										
14	6	Measles	9	8.25							.43	.39
18	10	Influenza	22	20.16							.35	.32
19	12	Asiatic cholera										
21–23	14	Dysentery	10	9.17							.33	.31
21	.....	Bacillary	1	.92							.02	.02
22	.....	Entamebic	7	6.42							.30	.27
23	.....	Unclassified	2	1.83							.01	.01
26	.....	Leprosy										
27	18	Erysipelas	1	.92							.03	.03
29	19b	Dengue										
34	19g	Mumps	1	.92							.02	.02
37	20	Purulent infection and septicemia										
48	27	Beriberi										
49–57	28–34	Tuberculosis, all	7	6.42				1	2	1.83	1.00	.92
49–51	28	Tuberculosis of lungs	4	3.67					1	.92	.28	.26
52	29	Miliary tuberculosis, acute	1	.92				1	1	.92	.09	.08
53–57	30–34	Tuberculosis of other organs	2	1.83							.63	.58
58	36	Scoliosis (ric ets)										
59–74	37–38	Venereal diseases, all	416	81.30							16.79	15.39
59–64	37	Syphilis	104	95.32							4.60	4.22
65–67	38a	Soft chancre	149	136.57							6.66	6.10
68–74	38b	Gonococcus infection	163	149.46							5.52	5.06
75–79	39–45	Cancer and other malignant tumors	1	.92				1	1	.92	.01	.01
80	46	Benign tumors										
81–85	47–48	Rheumatism, articular, all	5	4.58							.13	.12
81–82	47	Acute articular rheumatism	5	4.58							.13	.12
83–85	48	Chronic articular rheumatism										
89	51	Exophthalmic goitre	1	.92							.13	.12
97–100	56	Alcoholism and results	43	39.41				1	1	.92	.38	.34
103–104	59	Other chronic poisoning, including drug habit	3	2.75							.01	.01
107	61	Simple meningitis										
117–119	66	Paralysis without specified cause	1	.92							.01	.01
120–126	67–68	Mental alienation	3	2.75		2	1.91				.39	.36
127	69	Epilepsy	3	2.75							.03	.03
129–133	73	Neuralgia and neuritis	12	11.00							.09	.08
138–141	75a	Follicular conjunctivitis	5	4.58							.05	.05
142	75b	Trachoma										
169–174	79	Organic heart disease	1	.92							.26	.24
181	83b	Hemorrhoids	6	5.50							.13	.12
184	83e	Varicocele	3	2.75							.12	.11
185–187	84	Diseases of the lymphatic system	20	18.33							1.15	1.06
193–199	86	Disease of the nasal fossæ	27	24.75							.26	.24
200–202	87	Diseases of the larynx	12	11.00							.12	.11
205–206	89–90	Bronchitis	33	30.25							.42	.39
207	91	Broncho-pneumonia										
208	92	Pneumonia	11	10.08							.62	.57
209–215	93	Pleurisy	1	.92							.01	.01
219	96	Asthma										
221	98a	Hæmoptysis										
222	98b	Hay fever										

[1] Number of discharges and deaths which actually occurred.

ratios per 1,000 of mean strength, for American troops, officers and enlisted men, serving and the Philippine Islands, year 1914.

Porto Rico, officers and enlisted men.									Philippine Scouts, native enlisted men.							
707									5,020							
Admissions.		Discharges.			Deaths.			Noneffective.	Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio	Number.		Ratio.	Number.		Ratio.	Number. Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
		(1)	(2)		(1)	(2)										
									2	0.40					0.32	0.06
									18	3.59			1	0.20	.91	.18
9	12.73							0.16 0.23	1,013	201.80					17.15	3.48
									265	52.79					5.04	1.00
									1	.20					.32	.06
									2	.40					.08	.01
9	12.73							.16 .23	621	123.70					10.18	2.03
									124	24.70					1.88	.38
2	2.83							.12 .17	7	1.39					.50	.10
1	.41							.02 .02	13	2.59					.22	.04
									17	3.39					.83	.16
									2	.40					.06	.01
5	7.07							.15 .21	45	8.96					1.95	.39
									6	1.20					.30	.06
5	7.07							.15 .21	38	7.57			2	.40	1.62	.32
									1	.20					.03	.01
									4	.80	4	0.80			1.09	.22
6	8.49							.08 .11	28	5.58					.49	.10
1	1.41							.03 .05	41	8.17					2.04	.41
1	1.41															
									2	.40					.03	.01
1	1.41	3	3	4.48				.30 .43	33	6.57	26	5.18	4	.80	4.13	.82
1	1.41	3	3	4.48				.30 .43	26	5.18	22	4.38	2	.40	2.63	.52
									1	.20			1	.20	.10	.02
									6	1.20	4	1.00	1	.20	1.40	.28
									1	.20					.01	.00
47	66.48							2.71 3.84	289	57.57			1	.20	18.37	3.66
22	31.12							1.33 1.89	45	8.96					4.21	.84
12	16.97							.85 1.19	34	6.77					1.92	.38
13	18.39							.53 .75	210	41.84			1	.20	12.24	2.44
2	2.83							.07 .10	9	1.79					.33	.07
8	11.31							.22 .32	17	3.39					1.13	.23
7	9.90							.17 .24	15	2.99					.70	.14
1	1.41							.05 .07	2	.40					.43	.09
									3	.60					.01	.00
									1	.20			1	.20	.02	.00
1	1.41							.16 .23								
									14	2.79	10	1.99			.79	.16
3	4.24							.19 .26	14	2.79	1	.20			.86	.17
2	2.83							.05 .07	44	8.76					.92	.18
									1	.20					.03	.01
2	2.82	1	1	1.49				.55 .77	1	.20					.04	.01
1	1.41							.04 .06	3	.60					.15	.03
									2	.40					.07	.01
14	19.80							.50 .71	35	6.97					1.68	.33
83	117.39							1.04 1.47	12	2.39					.10	.02
1	1.41							.00 .00	6	1.20					.18	.03
1	1.41							.01 .02	123	24.50					3.02	.60
									2	.40					.42	.08
1	1.41							.09 .13	8	1.59					.93	.19
2	2.83							.09 .12	11	2.19					.56	.11
2	2.83							.08 .12	3	.60					.18	.04
									1	.20					.02	.00
															.01	.00

[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

TABLE No. 75.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with in China, for native troops in Porto Rico*

Serial Nos.	International classification.	Causes of admission to sick report.	China, total, officers and enlisted men.									
		Mean strength	1,091									
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)			
224–227	99a	Diseases of the teeth and gums	7	6.42							0.08	0.07
228–231	99b	Other diseases of the mouth and annexa	2	1.83							.02	.02
232–236	100	Diseases of the pharynx	57	52.25							.57	.52
239–244	103	Other diseases of stomach (cancer excepted)	7	6.42							.16	.15
245–253	105	Diarrhea and enteritis	63	57.74							.44	.40
254	106	Ankylostomiasis										
255–259	107	Intestinal parasites	12	11.00							.10	.09
260	108	Appendicitis	9	8.25		1	0.96	1	1	0.92	.56	.51
261–263	109	Hernia	2	1.83							.23	.21
264–267	110a	Diseases of the anus and fecal fistula	2	1.83							.08	.07
268–272	110b	Other diseases of the intestines	61	55.91							.44	.40
275	113	Cirrhosis of liver									.01	.01
276	114	Biliary calculi										
277–281	115	Other diseases of liver and gall bladder	5	4.58							.08	.07
288	119	Acute nephritis										
289–291	120	Bright's disease				1	.96					
303–306	124	Diseases of the bladder	3	2.75							.08	.08
304		Enuresis	1	1.92							.01	.01
307–309	125	Diseases of the urethra, urinary abscess, etc	2	1.80							.01	.01
313–319	127	Diseases of the male genital organs (nonvenereal)	2	1.83							.03	.03
322–323	143	Furuncle and carbuncle	9	8.25							.11	.10
324–325	144	Acute abscess and cellulitis	8	7.33							.20	.18
352–357	146	Diseases of the bones	2	1.83							.07	.06
358–360	147	Diseases of the joints	4	3.67							.10	.09
367	149	Flat foot	1	.92							.01	.01
372	150	Congenital malformations	5	4.58							.10	.09
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation										
379	189Ba	Under observation, undiagnosed and unknown	1	.92							.11	.10
380	189Bb	Malingering										
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[3]										
426–434	155–163	Suicides, all	1	.92				1	1	.92		
435	164a	Poisoning by food										
436	165	Venomous bites and stings	1	.92								
437	165b	Other poisoning (deleterious gases excepted)	1	.92								
439	167	Burns (conflagrations excepted)	2	1.83								
443	170	Traumatism by firearms (other than specified)										
445	171	Traumatism by cutting or piercing instruments	3	2.75								
446	172	Traumatism by fall	47	43.08								
448	174	Traumatism by machines										
449	175	Traumatism by other crushing	5	4.58								
450	176	Injuries by animals	4	3.67								
453	179	Effects of heat	3	2.75								
456–458	182–184	Homicides, all										
460	186	Other external violence	57	52.24								
462–466		Killed or wounded in action:										
462		By bullet										

[1] Number of discharges and deaths which actually occurred.
[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

ratios per 1,000 of mean strength, for American troops, officers and enlisted men, serving and the Philippine Islands, year 1914—Continued.

Porto Rico, officers and enlisted men.									Philippine Scouts, native enlisted men.							
707									5,020							
Admissions.		Discharges.			Deaths.			Noneffective.	Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
2	2.82							0.03 0.04	18	3.59					0.21	0.04
1	1.41							.01 .02	3	.60					.05	.01
14	19.80							.17 .25	21	4.18					.36	.07
2	2.83							.02 .03	34	6.77					.37	.07
26	36.78							.53 .75	133	26.49					1.52	.30
4	5.66							.23 .33	83	16.53					2.32	.46
3	4.24							.55 .78	54	10.76					1.00	.20
1	1.41							.29 .41	3	.60					.37	.07
4	5.66							.38 .54	5	1.00			2	0.40	.36	.07
									2	.40					.07	.01
9	12.72	1	1	1.49				.36 .52	231	46.02					2.33	.46
									1	.20					.01	.00
								.01 .02	5	1.00					.20	.04
									2	.40					.03	.01
															.05	.01
1	1.41							.18 .26								
1	1.41							.15 .22	10	1.99					.22	.04
14	19.79							.59 .83	18	3.59					.41	.08
12	16.97							.27 .39	152	30.28					3.10	.62
36	50.92							.64 .90	136	27.09					3.98	.79
									6	1.20					.44	.09
2	2.83	1	1	1.49				.12 .16	17	3.39	1	0.20			.71	.14
									1	.20					.07	.01
1	1.41							.02 .03	33	6.57					1.40	.28
1	1.41							.01 .02	19	3.78					.36	.07
1	1.41							.01 .02								
									4	.80					.08	.02
					1	1	1.41						1	.20		
1	1.41								3	.60			1	.20		
									14	2.79						
									1	.20			1	.20		
3	4.24								16	3.19						
1	1.41								9	1.79	1	.20				
8	11.32								67	13.35						
17	24.05				1	1	1.41		122	24.30						
3	4.24								4	.80						
4	5.66				1	1	1.41		38	7.57						
2	2.83															
1	1.41								15	2.99						
													2	.40		
17	24.05								185	36.85						
									1	.20	3	.60				

[1] Noneffectiveness for individual external causes not tabulated.

TABLE No. 75.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with in China, for native troops in Porto Rico*

Serial Nos.	International classification.	Causes of admission to sick report.	China, total, officers and enlisted men.								
		Mean strength	1,091								
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.
					(1)	(2)		(1)	(2)			
		DISEASES AND INJURIES GROUPED.										
		General diseases	550	504.12	....	....	.....	3	4	3.67	20.10	18.42
1–19		Epidemic diseases	73	66.91	....	....	.....	....	....	....	1.64	1.50
20–59		Other general diseases	477	437.21	....	....	.....	3	4	3.67	18.47	16.92
		Diseases of the nervous system and organs of special sense	45	41.25	....	2	1.91	....	....	....	.89	.82
60–74		Of the nervous system	28	25.66	....	2	1.91	....	....	....	.65	.60
75		Of the eye and its annexa	8	7.33	....	....	.....	....	....	....	.12	.11
76		Of the ear and its annexa	9	8.25	....	....	.....	....	....	....	.13	.12
77–85		Diseases of the circulatory system	31	28.41	....	....	.....	....	....	....	1.67	1.53
86–98		Diseases of the respiratory system	84	76.99	....	....	.....	....	....	....	1.44	1.32
99–118		Diseases of the digestive system	227	208.07	....	1	.96	1	1	.92	2.76	2.53
119–127		Diseases of the genito-urinary system	7	6.42	....	1	.96	....	....	....	.13	.12
142–145		Diseases of the skin and cellular tissue	40	36.66	....	....	.....	....	....	....	.90	.83
146–149		Diseases of the organs of locomotion	46	42.16	....	....	.....	....	....	....	.75	.68
150		Malformations, etc	5	4.58	....	....	.....	....	....	....	.10	.09
189		Ill-defined diseases	1	.92	....	....	.....	....	....	....	.11	.10
		Total for disease	1,036	949.58	....	4	3.82	4	5	4.58	28.85	26.44
155–186		External causes	124	113.66	....	....	.....	1	1	.92	2.67	2.44
		Total for diseases and external causes	1,160	1,063.24	....	4	3.82	5	6	5.50	31.51	28.88

[1] Number of discharges and deaths which actually occurred.

ratios per 1,000 of mean strength, for American troops, officers and enlisted men, serving and the Philippine Islands, year 1914—Continued.

Porto Rico, officers and enlisted men.										Philippine Scouts, native enlisted men.							
707										5,020							
Admissions.		Discharges.			Deaths.			Noneffective.		Admissions.		Discharges.		Deaths.		Noneffective.	
Number.	Ratio.	Number.		Ratio.	Number.		Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
		(1)	(2)		(1)	(2)											
92	130.13	3	3	4.48	....	....	.....	4.55	6.44	1,565	311.75	30	5.98	8	1.59	50.74	10.11
33	46.68	....	....	.....	....	....	.....	.88	1.25	1,209	240.84	4	.80	3	.60	26.69	5.32
59	83.45	3	3	4.48	....	....	.....	3.67	5.18	356	70.92	26	5.18	5	1.00	24.05	4.79
16	22.63	....	....	.....	....	....	.....	.57	.80	117	23.31	13	2.59	1	.20	4.35	.87
5	7.07	....	....	.....	....	....	.....	.38	.54	34	6.77	11	2.19	1	.20	1.74	.35
9	12.73	....	....	.....	....	....	.....	.16	.23	64	12.75	2	.40	....	.....	2.22	.44
2	2.83	....	....	.....	....	....	.....	.02	.03	19	3.78	....	.....	....	.....	.39	.08
19	26.87	1	1	1.49	....	....	.....	1.29	1.82	41	8.17	....	.....	....	.....	1.94	.39
91	128.71	....	....	.....	....	....	.....	1.32	1.87	167	33.27	....	.....	....	.....	5.43	1.08
66	93.35	1	1	1.49	....	....	.....	2.60	3.67	593	118.13	....	.....	2	.40	9.18	1.83
18	25.46	....	....	.....	....	....	.....	.96	1.36	31	6.18	....	.....	....	.....	.72	.14
62	87.69	....	....	.....	....	....	.....	1.59	2.26	471	93.82	....	.....	....	.....	11.79	2.35
10	14.14	1	1	1.49	....	....	.....	.39	.55	61	12.15	1	.20	....	.....	1.73	.34
1	1.41	....	....	.....	....	....	.....	.02	.03	33	6.57	....	.....	....	.....	1.40	.28
3	4.24	....	....	.....	....	....	.....	.10	.14	25	4.98	....	.....	....	.....	.45	.09
378	534.65	6	6	8.97	....	....	.....	13.39	18.93	3,104	618.33	44	8.76	11	2.19	87.72	17.48
57	80.62	....	....	.....	3	3	4.24	1.92	2.71	481	95.82	4	.80	5	1.00	14.16	2.82
435	615.28	6	6	8.97	3	3	4.24	15.30	21.64	3,585	714.14	48	9.56	16	3.19	101.89	20.30

[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

TABLE No. 75½.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength for American troops on Army transports, 1914.*

Serial Nos.	International classification.	Causes of admission to sick report.	Army transports, officers and enlisted men.							
		Mean strength	1,496.							
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
7–11	4	Malaria	21	14.23							0.85	0.58
7		Estivo-autumnal fever									.09	.06
8		Malarial cachexia									.28	.19
10		Tertian malarial fever	17	11.52							.42	.29
11		Undetermined malarial fever	4	2.71							.06	.04
14	6	Measles	27	18.29							.68	.46
18	10	Influenza	4	2.71							.07	.05
21–23	14	Dysentery	6	4.07							1.04	.71
22		Entamebic	4	2.71							.97	.66
23		Unclassified	2	1.36							.07	.05
31	19d	German measles	1	.68							.01	.01
34	19g	Mumps	40	27.10							.75	.51
49–57	28–34	Tuberculosis, all	4	2.71				1	1	0.68	7.96	5.39
49–51	28	Tuberculosis of lungs	4	2.71				1	1	.68	7.59	5.15
53–57	30–34	Tuberculosis of other organs									.36	.24
58	36	Scoliosis (rickets)									.03	.02
59–74	37–38	Venereal diseases, all	139	94.17							4.49	3.04
59–64	37	Syphilis	8	5.42							2.48	1.68
65–67	38a	Soft chancre	44	29.81							.72	.49
68–74	38b	Gonococcus infection	87	58.94							1.29	.87
75–79	39–45	Cancer and other malignant tumors									.25	.17
80	46	Benign tumors	2	1.36							.04	.02
81–85	47–48	Rheumatism, articular, all	9	6.10							.39	.26
81–82	47	Acute articular rheumatism	9	6.10							.20	.14
83–85	48	Chronic articular rheumatism									.18	.12
89	51	Exophthalmic goitre									.01	.00
97–100	56	Alcoholism and results	8	5.42		1	0.71		1	.68	.79	.54
103–104	59	Other chronic poisoning, including drug habit									.10	.07
109	62	Locomotor ataxia									.10	.07
120–126	67–68	Mental alienation	1	.68				1	1	.68	6.13	4.16
127	69	Epilepsy									.75	.51
129–133	73	Neuralgia and neuritis	3	2.04							.30	.20
138–141	75a	Conjunctivitis	5	3.39							.10	.06
142	75b	Trachoma									.17	.11
169–174	79	Organic heart disease	1	.68				1	1	.68	.68	.46
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc									.03	.02
181	83b	Hemorrhoids	2	1.36							.02	.01
185–187	84	Diseases of the lymphatic system	4	2.71							.09	.06
193–199	86	Diseases of the nasal fossæ	43	29.13							.47	.32
200–202	87	Diseases of the larynx	1	.68								
205–206	89–90	Bronchitis	29	19.65							.46	.31
207	91	Bronchopneumonia	1	.68							.04	.02
208	92	Pneumonia	6	4.07							.26	.18
209–215	93	Pleurisy	2	1.36							.40	.27
219	96	Asthma									.11	.08
220	97	Pulmonary emphysema									.08	.06
224–227	99a	Diseases of the teeth and gums	5	3.39							.09	.06
232–236	100	Diseases of the pharynx	55	37.26							.72	.48
238	102	Ulcer of stomach									.02	.02
239–244	103	Other diseases of stomach (cancer excepted)	24	16.26							.34	.23
245–253	105	Diarrhea and enteritis	29	19.65							.89	.60
260	108	Appendicitis	5	3.39							.29	.20
261–263	109	Hernia	4	2.71							.05	.03
264–267	110a	Diseases of the anus and fecal fistula									.08	.06

[1] Number of discharges and deaths which actually occurred.
[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.

TABLE No. 75½.—*Admissions to sick report, discharges, deaths, and noneffectiveness, with ratios per 1,000 of mean strength for American troops on Army transports, 1914*—Con.

Serial Nos.	International classification.	Causes of admission to sick report.	Army transports, officers and enlisted men.								
		Mean strength	1,496.								
			Admissions.		Discharges.			Deaths.			Noneffective.	
			Number.	Ratio.	Number. (1)	Number. (2)	Ratio.	Number. (1)	Number. (2)	Ratio.	Number.	Ratio.
268–272	110b	Other diseases of the intestines	25	16.94							0.52	0.35
275	113	Cirrhosis of liver	1	.68							.09	.06
276	114	Biliary calculi	1	.68							.00	.00
277–281	115	Other diseases of liver and gall bladder	2	1.36				1	1	0.68	.32	.21
289–291	120	Bright's disease						1	1	.68	.15	.10
303–306	124	Diseases of the bladder	2	1.36							.13	.09
307–309	125	Diseases of the urethra, urinary abscess, etc									.03	.02
313–319	127	Diseases of the male genital organs (nonvenereal)	1	.68							.03	.02
322–323	143	Furuncle and carbuncle	5	3.39							.06	.04
324–325	144	Acute abscess and cellulitis	6	4.07							.43	.29
352–357	146	Diseases of the bones									.28	.19
358–360	147	Diseases of the joints	5	3.39							.41	.27
372	150	Congenital malformations	1	.68							.13	.09
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	9	6.10							.22	.15
379	189Ba	Under observation, undiagnosed and unknown	1	.68							.01	.00
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.[3]										
439	167	Burns (conflagrations excepted)	3	2.03								
445	171	Traumatism by cutting or piercing nstruments	2	1.36								
446	172	Traumatism by fall	12	8.13								
449	175	Traumatism by other crushing	1	.68								
460	186	Other external violence	7	4.74								
		DISEASES AND INJURIES GROUPED.										
		General diseases	261	176.83		1	0.71	1	2	1.36	17.45	11.82
	1–19	Epidemic diseases	99	67.07							3.41	2.31
	20–59	Other general diseases	162	109.76		1	.71	1	2	1.36	14.04	9.51
		Diseases of the nervous system and organs of special sense	16	10.85				1	1	.68	9.14	6.19
	60–74	Of the nervous system	4	2.71				1	1	.68	8.26	5.60
	75	Of the eye and its annexa	6	4.07							.72	.48
	76	Of the ear and its annexa	6	4.07							.16	.11
	77–85	Diseases of the circulatory system	7	4.74				1	1	.68	.82	.55
	86–98	Diseases of the respiratory system	82	55.56							1.82	1.23
	99–118	Diseases of the digestive system	151	102.30					1	.68	3.41	2.31
	119–127	Diseases of the genito-urinary system	3	2.03				1	1	.68	.35	.23
	142–145	Diseases of the skin and cellular tissue	30	20.33							.97	.66
	146–149	D seases of the organs of locomotion	10	6.78							1.05	.71
	150	Malformations, etc	1	.68							.13	.09
	189	Ill-defined diseases	101	68.43							1.19	.81
		Total for disease	662	448.51		1	.71	4	6	4.07	36.32	24.61
	155–186	External causes	25	16.94							2.76	1.87
		Total for disease and external causes	687	465.45		1	.71	4	6	4.07	39.07	26.47

[1] Number of discharges and deaths which actually occurred.
[2] Number of discharges and deaths, including those of cases invalided home and deducted from the United States.
[3] Noneffectiveness for individual external causes not tabulated.

TABLE NO. 76.—*Admissions to sick report, discharges, deaths, and noneffectiveness, expressed in ratios per 1,000 of mean strength, for American troops (enlisted men) on duty at home stations, placed in comparison with the same data for those serving at distant stations, year 1914.*

Serial No.	International classification.	Causes of admission to sick report.	United States.				Alaska.				Panama.				China.			
			Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
1	1	Typhoid fever	0.11	.....	0.05	0.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.02
2	1a	Paratyphoid fever	.11	.....	.....	.01	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5	2	Typhus fever	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.96	.....	.....	.11
7–11	4	Malaria	10.79	.....	.....	.24	2.19	.....	.....	0 04	208.16	.....	.....	7.79	20.06	.....	.....	.27
7	.....	Estivo-autumnal fever	.65	.....	.....	.02	1.09	.....	.....	.03	130.35	.....	.....	5.31	.96	.....	.....	.01
8	.....	Malarial a hexia	.05	.....	.....	.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9	.....	Quartan malarial fever	.11	.....	.....	.00	.....	.....	.....	.....	1.99	.....	.....	.03	.....	.....	.....	.....
10	.....	Tertian malarial fever	9.34	.....	.....	.17	.....	.....	.....	.....	47.76	.....	.....	1.53	19.10	.....	.....	.26
11	.....	Undetermined malarial fever	.64	.....	.....	.01	1.09	.....	.....	.01	28.85	.....	.....	.88	.....	.....	.....	.....
12	5	Smallpox and varioloid	.11	.....	.02	.00	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
13	5b	Vaccinia	9.66	.....	.....	.11	1.09	.....	.....	.01	.....	.....	.....	.....	.....	.....	.....	.....
14	6	Measles	7.30	0.02	.13	.36	1.09	.....	.....	.05	1.00	.....	.....	.05	8.60	.....	.....	.41
15	7	Scarlet fever	.46	.....	.02	.04	.....	.....	.....	.....	.50	.....	.....	.02	.....	.....	.....	.....
17	9	Diphtheria	.60	.....	.....	.04	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
18	10	Influenza	11.78	.....	.....	.18	24.04	.....	.....	.32	31.34	.....	.....	.66	19.10	.....	.....	.27
20	13	Cholera nostras	.03	.....	.....	.00	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
21–23	14	Dysentery	1.50	.03	.03	.11	.....	.....	.....	.....	.....	.....	.....	.....	8.60	.....	.....	.29
21	.....	Bacillary	.03	.....	.....	.00	.....	.....	.....	.....	.....	.....	.....	.....	.96	.....	.....	.02
22	.....	Entamœbic	.90	.03	.03	.10	.....	.....	.....	.....	.....	.....	.....	.....	5.73	.....	.....	.25
23	.....	Unclassified	.57	.....	.....	.01	.....	.....	.....	.....	.....	.....	.....	.....	1.91	.....	.....	.01
27	18	Erysipelas	.54	.....	.02	.02	1.09	.....	.....	.04	.....	.....	.....	.....	.96	.....	.....	.03
29	19b	Dengue	.81	.....	.....	.01	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
31	19d	German measles	1.11	.....	.....	.03	1.09	.....	.....	.03	.....	.....	.....	.....	.....	.....	.....	.....
32	19e	Hemoglobinuric fever	.....	.....	.....	.....	.....	.....	.....	.....	.50	.....	.....	.00	.....	.....	.....	.....
34	19g	Mumps	8.91	.....	.....	.38	2.19	.....	.....	.10	15.42	.....	.....	.70	.96	.....	.....	.02
37	20	Purulent infection and septicemia	.11	.....	.10	.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
42–46	25	Mycoses	.05	.....	.....	.00	1.09	.....	.....	.04	.....	.....	.....	.....	.....	.....	.....	.....
49–57	28–34	Tuberculosis, all	2.69	2.10	.47	2.23	1.09	.....	1.09	.34	2.49	0.48	.....	.17	6.69	.....	1.91	.96
49–51	28	Tuberculosis of lungs	2.35	1.97	.24	2.11	1.09	.....	1.09	.34	1.99	.48	.....	.09	3.82	.....	.96	.27
52	29	Miliary tuberculosis, acute	.05	.....	.10	.01	.....	.....	.....	.....	.....	.....	.....	.....	.96	.....	.96	.09
53–57	30–34	Tuberculosis of other organs	.30	.13	.13	.10	.....	.....	.....	.....	.50	.....	.....	.08	1.92	.....	.....	.60
58	36	Scoliosis (rickets)	.....	.....	.....	.00	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	m
59–74	37–38	Venereal diseases, all	89.84	.87	.05	3.75	21.86	.....	.....	.31	135.82	.....	.....	6.83	396.37	.....	.....	16.03
59–64	37	Syphilis	18.53	.55	.05	1.15	4.37	.....	.....	.05	17.91	.....	.....	1.07	98.38	.....	.....	4.40
65–67	38a	Soft chancre	19.96	.....	.....	.80	2.19	.....	.....	.....	44.78	.....	.....	2.29	142.31	.....	.....	6.36
68–74	38b	Gonococcus infection	51.35	.32	.....	1.80	15.30	.....	.....	.25	73.13	.....	.....	3.47	155.68	.....	.....	5.28
75–79	39–45	Cancer and other malignant tumors	.24	.03	.10	.05	.....	.....	.....	.....	.50	.....	.....	.04	.96	.....	.96	.01

80	46	Benign tumors	1.22	.02		.04					3.48			.11				
81–85	47–48	Rheumatism, articular, all	6.67	.12		.46	4.37			.06	4.48			.26	3.82			.07
81–82	47	Acute articular rheumatism	5.69	.07		.35	2.18			.05	3.48			.15	3.82			.07
83–85	48	Chronic articular rheumatism	.98	.05		.12	2.19			.01	1.00			.11				
87–88	50	Diabetes	.15	.05		.01												
89	51	Exophthalmic goitre	.21	.16		.05									.96			.12
97–100	56	Alcoholism and results	13.46	.19	.05	.21	17.49			.20	9.95			.08	41.07		.96	.36
103–104	59	Other chronic poisoning, including drug habit	.37	.05		.01									2.87			.01
105–106	60	Encephalitis	.05		.05	.00												
107	61	Simple meningitis	.11		.05	.01												
108	61a	Epidemic cerebrospinal meningitis	.23	.05	.08	.03												
109	62	Locomotor ataxia	.10	.03		.02												
110–115	63	Other diseases of spinal cord	.07	.03		.02					.50	.48		.09				
116	64	Cerebral hemorrhage, apoplexy	.03	.02	.02	.00												
117–119	66	Paralysis without specified cause	.33	.02		.04									.96			.01
120–126	67–68	Mental alienation	3.83	3.02	.03	1.06	9.84	3.28		1.03	6.97	2.85		.94	2.87	1.91		.37
127	69	Epilepsy	1.29	.84	.03	.13	1.09			.03	2.99			.27	2.87			.03
129–133	73	Neuralgia and neuritis	4.96	.25		.25	4.37	2.19		.24	3.49			.20	11.46			.08
138–141	75a	Follicular conjunctivitis	3.99			.07					4.48			.15	3.82			.05
142	75b	Trachoma	.10	.02		.01												
166	77	Pericarditis	.03		.02	.00												
167	78	Acute endocarditis	.10			.02	2.19		1.09	.03								
169–174	79	Organic heart disease	1.27	.66	.21	.15					4.49	1.43		.32	.96			.25
175	80	Angina pectoris	.07	.02		.01												
176–177	81	Diseases of the arteries, atheroma, aneurism, etc	.18	.05	.05	.02												
178–17	82	Embolism and thrombosis	.02		.03	.00												
181	83b	Hemorrhoids	6.42	.02		.17	6.56			.12	14.43			.52	5.73			.12
183	83d	Varicose veins	.62	.02		.05					1.49			.07				
184	83e	Varicocele	2.12			.10					4.98			.52	2.87			.12
185–187	84	Diseases of the lymphatic system	5.12			.32					22.88			1.53	19.10			1.10
193–199	86	Diseases of the nasal fossæ	9.71	.02		.13	2.18			.02	17.42			.31	24.83			.25
200–202	87	Diseases of the larynx	3.03		.02	.05	3.28			.02					8.60			.06
203–204	88	Diseases of the thyroid body	.17	.02	.02	.02					.50			.00				
205–206	89–90	Bronchitis	35.36	.08		.62	20.77			.31	18.91			.51	28.65			.37
207	91	Bronchopneumonia	.51		.02	.04								.03				
208	92	Pneumonia	2.64	.02	.24	.21									10.51			.60
209–215	93	Pleurisy	2.59	.05		.16	3.28			.07	7.46			.32	.96			.01
216–217	94	Pulmonary congestion and pulmonary apoplexy	.08		.02	.00												
219	96	Asthma	1.34	.19		.13					1.99	.48		.18				
220	97	Pulmonary emphysema				.00												
221	98a	Hæmoptysis	.11			.00												
222	98b	Hay fever	.03			.00												
224–227	99a	Diseases of the teeth and gums	4.58			.07	3.28			.07	9.46			.11	4.78			.06
228–231	99b	Other diseases of the mouth and annexa	.90			.02									1.91			.02
232–236	100	Diseases of the pharynx	65.43		.02	.90	53.56			.87	57.71			1.06	53.49			.53
238	102	Ulcer of stomach	.29	.02	.05	.05	1.09			.02	.50			.08				
239–244	103	Other diseases of stomach (cancer excepted)	8.44	.02	.03	.14	7.65			.11	14.92			.16	6.69			.16
245–253	105	Diarrhœa and enteritis	25.55	.03	.05	.32	7.65			.06	15.92			.34	57.31			.41

TABLE No. 76.—*Admissions to sick report, discharges, deaths, and noneffectiveness, expressed in ratios per 1,000 of mean strength, for American troops (enlisted men) on duty at home stations, placed in comparison with the same data for those serving at distant stations, year 1914*—Continued.

Serial No.	International classification.	Causes of admission to sick report.	United States.				Alaska.				Panama.				China.			
			Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
254	106	Ankylostomiasis	0.68	.....	.....	0.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
255–259	107	Intestinal parasites	.83	.....	.....	.01	.....	.....	.....	.....	0.50	.....	.....	0.00	11.46	.....	.....	0.10
260	108	Appendicitis	7.15	0.06	0.15	.54	13.11	.....	.....	0.66	21.89	.....	.....	1.38	8.60	0.96	0.96	.53
261–263	109	Hernia	4.54	.15	.05	.45	7.65	1.09	.....	.70	6.47	0.48	.....	.79	1.91	.....	.....	.22
264–267	110a	Diseases of the anus and fecal fistula	.81	.....	.....	.05	.....	.....	.....	.....	.50	.....	.....	.00	1.91	.....	.....	.07
268–272	110b	Other diseases of the intestines	19.78	.11	.....	.30	7.65	.....	.....	.18	21.40	.....	.....	.35	57.31	.....	.....	.42
275	113	Cirrhosis of liver	.05	.....	.02	.01	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.01
276	114	Biliary calculi	.16	.....	.....	.00	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
277–281	115	Other diseases of liver and gall bladder	2.67	.....	.....	.11	3.27	.....	.....	.07	5.48	.....	.....	.33	4.78	.....	.....	.07
283–284	117	Simple peritonitis	.05	.....	.02	.00	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
288	119	Acute nephritis	.24	.....	.05	.02	.....	.....	.....	.....	1.99	.....	.....	.07	.....	.....	.....	.....
289–291	120	Bright's disease	.69	.21	.10	.15	.....	.....	.....	.....	1.00	.48	0.48	.08	.....	.96	.....	.....
293–299	122	Other diseases of the kidney and annexa	.26	.03	.02	.02	.....	.....	.....	.....	1.00	.48	.....	.15	.....	.....	.....	.....
303–306	124	Diseases of the bladder	1.71	.38	.....	.10	1.09	1.09	.....	.08	1.50	.....	.....	.07	2.87	.....	.....	.08
304	124b	Enuresis	.88	.36	.....	.06	.....	.....	.....	.....	.....	.....	.....	.....	.96	.....	.....	.01
307–309	125	Diseases of the urethra, urinary abscess, etc	1.05	.....	.....	.04	1.09	.....	.....	.01	1.49	.....	.....	.11	1.91	.....	.....	.01
310–312	126	Diseases of the prostate	.12	.....	.....	.01	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
313–319	127	Diseases of the male genital organs (nonvenereal)	3.65	.02	.....	.12	6.56	.....	.....	.11	2.39	.....	.....	.12	1.91	.....	.....	.03
322–323	143	Furuncle and carbuncle	12.90	.....	.....	.21	7.65	.....	.....	.10	14.93	.....	.....	.18	8.60	.....	.....	.10
324–325	144	Acute abscess and cellulitis	11.28	.02	.....	.31	5.46	.....	.....	.09	11.94	.....	.....	.47	7.65	.....	.....	.18
352–357	146	Diseases of the bones	1.80	.07	.....	.13	1.09	.....	.....	.13	1.50	.....	.....	.18	1.91	.....	.....	.06
358–360	147	Diseases of the joints	3.68	.29	.....	.26	3.28	.....	.....	.05	4.48	.....	.....	.61	2.87	.....	.....	.07
367	149g	Flat foot	1.76	1.16	.....	.19	.....	.....	.....	.....	.....	.....	.....	.....	.96	.....	.....	.01
372	150	Congenital malformations	2.92	.06	.....	.10	7.65	.....	.....	.12	1.99	.....	.....	.05	4.78	.....	.....	.09
373–374	154	Senility	.....	.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	1.52	.....	.....	.03	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
379	189Ba	Under observation, undiagnosed and unknown	.90	.....	.05	.02	1.09	.....	.....	.00	.....	.....	.....	.....	.96	.....	.....	.10
380	189Bb	Malingering	.42	.....	.....	.02	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.																
426–434	155–163	Suicides, all	.20		.60				1.09				.48		.96		.96	
435	164	Poisoning by food	1.08		.02		2.19				1.00							
436	165a	Venomous bites and stings	.86								5.47				.96			
437	165b	Other poisoning (deleterious gases excepted)	.86		.11										.96			
439	167	Burns (conflagrations excepted)	3.68	.05			1.09				4.98				1.91			
440	168	Absorption of deleterious gases	.10		.02													
442	169	Drowning, accidental			.61				2.19				.95					
443	170	Traumatism by firearms (other than specified)	2.92	.37	.19		3.28				1.49	.48						
444	170a	Shot by sentry or guard	.02															
445	171	Traumatism by cutting or piercing instruments	9.97	.10			3.28				13.43				2.87			
446	172	Traumatism by fall	37.14	.29	.08		45.91		1.09		34.50				44.89			
447	173	Traumatism in mines and quarries	.08															
448	174	Traumatism by machines	1.01	.02							.50							
449	175	Traumatism by other crushing	9.37	.42	.19		2.19				10.45		1.43		4.78			
450	176	Injuries by animals	14.31	.10	.03		1.09				1.49				2.87			
452	178	Effects of excessive cold	.81		.02		4.37		2.19									
453	179	Effects of heat	1.37		.02		1.09				1.00				2.87			
455	181	Effects of electricity	.03				1.09											
456–458	182 4	Homicides, all	.21		.32													
460	186	Other external violence	45.63	.31	.08		40.44				44.00				50.62			
462–466	.....	Killed or wounded in action		.02														
462	.....	By bullet		.02														
		DISEASES AND INJURIES GROUPED.[1]																
		General diseases	175.40	3.69	1.02	8.50	79.78		1.09	1.55	419.90	.48		16.88	517.67		3.82	19.02
	1–19	Epidemic diseases	60.22	.05	.26	1.62	33.88			.60	257.70			9.22	63.99			1.44
	20–59	Other general diseases	115.19	3.64	.76	6.88	45.90		1.09	.95	162.19	.48		7.66	453.68		3.82	17.58
		Diseases of the nervous system and organs of special sense	27.21	4.98	.27	2.28	31.70	5.46		1.95	61.70	3.81		3.11	42.03	1.91		.85
	60–74	Of the nervous system	13.44	4.56	.27	1.74	18.58	5.46		1.35	18.41	3.33		1.83	26.74	1.91		.62
	75	Of the eye and its annexa	8.77	.26		.34	9.84			.39	12.44			.44	6.69			.11
	76	Of the ear and its annexa	5.00	.16		.20	3.28			.21	30.85	.48		.84	8.60			.12
	77–85	Diseases of the circulatory system	17.16	.87	.31	.92	8.74		1.09	.15	49.25			2.97	29.61			1.59
	86–98	Diseases of the respiratory system	55.80	.37	.31	1.38	29.51			.42	46.27	.48		1.34	73.54			1.28
	99–118	Diseases of the digestive system	142.11	.40	.40	3.04	104.92	1.09	1.09	2.75	154.73	.48		4.62	210 12	.96	.96	2.60
	119–127	Diseases of the genito-urinary system	8.12	.65	.16	.48	8.74	1.09		.21	11.94	.95		.64	6.69	.96		.12
	142–145	Diseases of the skin and cellular tissue	45.01	.16		1.12	19.67			.28	62.19			1.60	38.20			.86
	146–149	Diseases of the organs of locomotion	21.87	1.63		.94	22.95			.37	26.87	1.43		2.17	42.98			.69
	150	Malformations, etc	2.92	.06		.10	7.65			.12	1.99			.05	4.78			.09
	154	Diseases, results of old age		.02														
	189	Ill-defined diseases	3.23		.05	.08	1.09			.00					.96			.10
		Total for disease	498 83	12 83	2.52	18.84	314.75	7.65	3.28	7.79	834 83	9.04	.48	33.39	966.57	3.82	4.78	27.22
	155–186	External causes	131.01	1.99	2.30	4.53	108.20	1.09	5.46	2.73	120.40	1.90	2.85	3.91	113 66		.96	2.47
		Total for disease and external causes	629.84	14.82	4.82	23.37	422.95	8.74	8.74	10.52	955.22	10.94	3.33	37.30	1,080.23	3.82	5.73	29.68

[1] Noneffectiveness for individual external causes not tabulated.

TABLE No. 76.—*Admissions to sick report, discharges, deaths, and noneffectiveness, expressed in ratios per 1,000 of mean strength, for American troops (enlisted men) on duty at home stations, placed in comparison with the same data for those serving at distant stations, year 1914*—Continued.

Serial No.	International classification.	Causes of admission to sick report.	Hawaii.				Transports.				Philippines.				Vera Cruz.				Army.			
			Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
1	1	Typhoid fever	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.08	.....	0.03	0.01
2	1a	Paratyphoid fever	0.13	.....	.....	0.02	.....	.....	.....	.....	0.10	.....	.....	0.03	.....	.....	.....	.....	.10	.....	.....	.01
5	2	Typhus fever	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.00	.....	.....	.....	.....	.01	.....	.....	.00
7–11	4	Malaria	1.25	.....	.....	.03	14.25	.....	.....	0.60	45.26	.....	.....	1.13	67.08	.....	0.44	1.95	20.07	.....	.01	.55
7	.....	Estivo-autumnal fever	.....	.....	.....	.....	.....	.....	.....	.06	9.46	.....	.....	.29	31.33	.....	.44	.92	5.41	.....	.01	.20
8	.....	Malarial cachexia	.....	.....	.....	.....	.....	.....	.....	.20	.49	.....	.....	.03	.44	.....	.....	.03	.10	.....	.....	.02
9	.....	Quartan malarial fever	.....	.....	.....	.....	.....	.....	.....	.....	.59	.....	.....	.03	.....	.....	.....	.....	.19	.....	.....	.01
10	.....	Tertian malarial fever	1.25	.....	.....	.03	12.11	.....	.....	.30	29.35	.....	.....	.67	33.98	.....	.....	.91	12.54	.....	.....	.27
11	.....	Undetermined malarial fever	.....	.....	.....	.....	2.14	.....	.....	.04	5.36	.....	.....	.10	1.32	.....	.....	.09	1.82	.....	.....	.05
12	5	Smallpox and varioloid	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.08	.....	.01	.00
13	5b	Vaccinia	.....	.....	.....	.....	.....	.....	.....	.....	.10	.....	.....	.00	.44	.....	.....	.00	6.83	.....	.....	.08
14	6	Measles	6.15	.....	.....	.35	19.23	.....	.....	.49	.68	.....	.....	.14	3.09	.....	.....	.15	6.31	0.01	.09	.32
15	7	Scarlet fever	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.33	.....	.01	.03
17	9	Diphtheria	.50	.....	.....	.11	.....	.....	.....	.....	.10	.....	.....	.00	.88	.....	.....	.05	.50	.....	.....	.04
18	10	Influenza	26.72	.....	.....	.55	2.14	.....	.....	.04	2.24	.....	.....	.04	2.21	.....	.....	.01	12.29	.....	.....	.21
19	12	Asiatic cholera	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.00	.....	.....	.....	.....	.....	.....	.....	.00
20	13	Cholera nostras	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.02	.....	.....	.00
21–23	14	Dysentery	.....	.....	.....	.....	4.27	.....	.....	.62	12.97	.....	0.09	.76	22.07	.....	.44	1.07	3.32	.02	.05	.21
21	.....	Bacillary	.....	.....	.....	.....	.....	.....	.....	.....	1.56	.....	.....	.10	12.36	.....	.44	.66	.54	.....	.01	.03
22	.....	Entamœbic	.....	.....	.....	.....	2.85	.....	.....	.57	10.53	.....	.09	.64	3.53	.....	.....	.19	2.08	.02	.03	.16
23	.....	Unclassified	.....	.....	.....	.....	1.42	.....	.....	.05	.88	.....	.....	.02	6.18	.....	.....	.22	.71	.....	.....	.02
27	18	Erysipelas	.38	.....	.....	.02	.....	.....	.....	.....	.....	.....	.....	.....	.88	.....	.....	.02	.46	.....	.01	.01
29	19b	Dengue	.....	.....	.....	.....	.....	.....	.....	.....	33.16	.....	.....	.55	3.53	.....	.....	.06	4.56	.....	.....	.08
31	19d	German measles	.....	.....	.....	.....	.71	.....	.....	.01	.....	.....	.....	.01	2.21	.....	.....	.06	.86	.....	.....	.02
32	19e	Hemoglobinuric fever	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.01	.....	.....	.00
34	19g	Mumps	10.29	.....	.....	.52	28.49	.....	.....	.53	6.73	.....	.....	.30	1.77	.....	.....	.09	8.90	.....	.....	.38
37	20	Purulent infection and septicemia	.25	.....	0.25	.00	.....	.....	.....	.....	.....	.....	.09	.....	.....	.....	.....	.....	.10	.....	.10	.01
42–46	25	Mycoses	.....	.....	.....	.....	.....	.....	.....	.....	.20	.....	.....	.01	.....	.....	.....	.....	.08	.....	.....	.00
49–57	28–34	Tuberculosis, all	3.01	1.88	.50	.23	2.85	.....	0.71	5.53	7.31	3.41	.28	.60	4.85	.....	.44	.23	3.35	2.07	.47	1.77
49–51	28	Tuberculosis of lungs	2.63	1.63	.38	.20	2.85	.....	.71	5.29	6.92	3.22	.09	.55	4.85	.....	.44	.17	2.98	1.93	.26	1.67
52	29	Miliary tuberculosis, acute	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.09	.....	.....	.....	.....	.....	.05	.....	.09	.01
53–57	30–34	Tuberculosis of other organs	.38	.26	.13	.04	.....	.....	.....	.24	.39	.18	.09	.05	.....	.....	.....	.06	.31	.13	.11	.09
58	36	Scoliosis (rickets)	.13	.13	.....	.03	.....	.....	.....	.02	.....	.....	.....	.....	.....	.....	.....	.....	.01	.01	.....	.01

59–74	37–38	Venereal diseases, all	67.37	.63	.13	3.53	99.00			3.20	185.60	.76	.09	10.41	377.32			5.50	110.69	.76	.06	4.73
59–64	37	Syphilis	18.69	.50	.13	1.26	5.70			1.77	47.49	.47	.09	2.56	36.63			1.09	23.01	.49	.06	1.36
65–67	38a	Soft chancre	8.03			.38	31.34			.52	55.10			2.76	177.41			2.72	29.49			1.13
68–74	38b	Gonococcus infection	40.65	.13		1.89	61.96			.92	83.00	.28		5.10	149.63			1.69	58.20	.27		2.24
75–79	39–45	Cancer and other malignant tumors								.17	.29		.19	.05	.44		.44	.02	.24	.02	.11	.05
80	46	Benign tumors	2.13			.13	.71			.02	1.07			.03	2.21			.07	1.33	.01		.05
81–85	47–48	Rheumatism, articular, all	2.64			.22	6.41			.28	2.93			.24	3.96			.09	5.67	.08		.39
81–82	47	Acute articular rheumatism	1.63			.10	6.41			.14	1.56			.09	2.64			.04	4.65	.05		.27
83–85	48	Chronic articular rheumatism	1.01			.12				.14	1.37			.15	1.32			.05	1.02	.03		.12
87–88	50	Diabetes																	.10	.03		.01
89	51	Exophthalmic goitre	.13			.01				.00	.20			.01	.88			.07	.22	.11		.04
97–100	56	Alcoholism and results	12.04	.13		.14	4.99	.71	.71	.55	22.14	.09	.19	.34	30.01	.44	.44	.32	14.94	.18	.09	.22
103–104	59	Other chronic poisoning, including drug habit	.51			.00				.07	.49			.02					.40	.03		.01
105–106	60	Encephalitis									.10		.09	.00					.05		.05	.00
107	61	Simple meningitis																	.08		.03	.01
108	61a	Epidemic cerebrospinal meningitis	.13	.25		.02					.10		.09	.01	.44				.19	.06	.07	.02
109	62	Locomotor ataxia																	.07	.02		.01
110–115	63	Other diseases of spinal cord													.44			.03	.08	.03		.01
116	64	Cerebral hemorrhage, apoplexy													.44			.05	.03	.01	.01	.00
117–119	66	Paralysis without specified cause	.25			.01					.10			.01					.27	.01		.03
120–126	67–68	Mental alienation	3.77	2.64		.35	.71		.71	4.25	6.24	3.51		.48	3.98	1.32		.11	4.18	2.94	.01	.94
127	69	Epilepsy	.50			.04				.54	1.17	.28		.07	1.32	.44		.03	1.24	.04	.02	.12
129–133	73	Neuralgia and neuritis	3.14	.50		.11	2.13			.21	4.58	.28		.19	2.65			.10	4.68	.27		.23
138–141	75a	Follicular conjunctivitis	3.02			.06	3.56			.07	5.36			.09	.44			.00	3.93			.07
142	75b	Trachoma								.12	.59	.19		.04					.14	.03		.02
166	77	Pericarditis	.13			.01					.20			.00					.06		.01	.00
167	78	Acute endocarditis																	.09		.01	.01
169–174	79	Organic heart disease	1.26	.26		.16	.71		.71	.49	2.44	.09	.09	.11	.44			.01	1.43	.53	.17	.16
175	80	Angina pectoris									.10			.00					.06	.01		.00
176–177½	81	Diseases of the arteries, atheroma, aneurism, etc.	.50		.13	.01				.02	.68	.09	.28	.03					.25	.05	.08	.02
178–179	82	Embolism and thrombosis									.20			.01					.03		.02	.00
181	83b	Hemorrhoids	6.65			.22	1.42			.01	7.22			.20	5.30			.10	6.60	.01		.18
183	83d	Varicose veins	.50			.05					1.27			.10					.66	.01		.05
184	83e	Varicocele	3.39			.22					4.00			.17	.88			.05	2.44			.13
185–187	84	Diseases of the lympathic system	3.01			.11	2.85			.06	10.63			.51	13.68			.76	6.28			.37
193–199	86	Diseases of the nasal fossæ	4.03	.13		.12	30.63			.34	14.92			.22	4.41			.07	10.28	.02		.14
200–202	87	Diseases of the larynx	.63			.01	.71				1.46			.03	.88			.01	2.53		.01	.04
203–204	88	Diseases of the thyroid body	.26			.00					.29			.02					.18	.01	.01	.01
205–206	89–90	Bronchitis	32.87			.70	20.65			.33	31.60	.09		.82	34.86			.82	33.83	.07		.64
207	91	Bronchopneumonia	.38		.13	.04	.71			.03	.59			.05	2.65		.44	.18	.54		.03	.05
208	92	Pneumonia	.75			.12	4.27			.19	.88			.07	.88			.02	2.25	.01	.17	.18
209–215	93	Pleurisy	1.01			.05	1.42			.28	2.73	.19		.13	7.50			.29	2.67	.06		.16

TABLE No. 76.—*Admissions to sick report, discharges, deaths, and noneffectiveness, expressed in ratios per 1,000 of mean strength, for American troops (enlisted men) on duty at home stations, placed in comparison with the same data for those serving at distant stations, year 1914*—Continued.

Serial No.	International classification.	Causes of admission to sick report.	Hawaii.				Transports.				Philippines.				Vera Cruz.				Army.			
			Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
216–217	94	Pulmonary congestion and pulmonary apoplexy	.....	.....	.....	.....	.....	.....	.....	.....	1.07	.....	.....	0.03	0.44	.....	.....	0.00	0.19	.....	0.01	0.00
219	96	Asthma	1.88	0.25	.....	0.10	.....	.....	.....	0.08	1.46	.....	.....	.05	1.77	.....	.....	.04	1.36	0.17	.....	.11
220	97	Pulmonary emphysema	.....	.....	.....	.....	.....	.....	.....	.06	.20	.....	.....	.00	.....	.....	.....	.....	.02	.....	.....	.00
221	98a	Hæmoptysis	.....	.....	.....	.....	.....	.....	.....	.....	.10	.....	.....	.00	.....	.....	.....	.....	.09	.....	.....	.00
222	98b	Hay fever	.13	.....	.....	.00	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.03	.....	.....	.00
224–227	99a	Diseases of the teeth and gums	5.15	.13	.....	.10	3.56	.....	.....	.06	4.88	0.09	.....	.11	.44	.....	.....	.01	4.64	.02	.....	.08
228–231	99b	Other diseases of the mouth and annexa	.51	.....	.....	.01	.....	.....	.....	.....	.68	.....	.....	.02	.....	.....	.....	.....	.78	.....	.....	.02
232–236	100	Diseases of the pharynx	27.97	.....	.....	.47	39.17	.....	.....	.50	38.53	.....	.....	.61	26.04	.....	.....	.34	56.96	.....	.01	.81
238	102	Ulcer of stomach	.25	.....	.....	.03	.....	.....	.....	.02	.59	.....	.....	.09	.88	.....	.....	.04	.34	.01	.03	.05
239–244	103	Other diseases of stomach (cancer excepted)	7.66	.....	.....	.26	16.38	.....	.....	.24	17.65	.....	.....	.34	7.06	.....	.....	.09	9.66	.01	.02	.18
245–253	105	Diarrhea and enteritis	26.60	.....	.....	.37	20.66	.....	.....	.57	63.10	.19	.....	.91	80.76	.....	.....	1.13	31.39	.05	.03	.42
254	106	Ankylostomiasis	.13	.....	.....	.02	.....	.....	.....	.....	.59	.....	.....	.02	.....	.....	.....	.....	.56	.....	.....	.02
255–259	107	Intestinal parasites	1.38	.....	.....	.03	.....	.....	.....	.....	1.76	.....	.....	.09	.88	.....	.....	.01	1.09	.....	.....	.02
260	108	Appendicitis	6.90	.....	.....	.53	3.56	.....	.....	.21	11.90	.....	0.28	.88	7.94	.....	.....	.39	8.07	.06	.15	.59
261–263	109	Hernia	4.27	.....	.....	.50	2.14	.....	.....	.03	2.63	.....	.....	.31	3.53	.....	.....	.23	4.28	.12	.03	.44
264–267	110a	Diseases of the anus and fecal fistula	.76	.....	.....	.05	.....	.....	.....	.06	1.17	.....	.....	.08	.....	.....	.....	.....	.80	.....	.....	.05
268–272	110b	Other diseases of the intestines	19.95	.....	.....	.24	17.80	.....	.....	.37	38.53	.09	.....	.52	13.23	.....	.....	.22	22.16	.09	.....	.32
275	113	Cirrhosis of liver	.....	.....	.....	.....	.71	.....	.....	.07	.....	.....	.....	.00	.....	.....	.....	.....	.05	.....	.02	.01
276	114	Biliary calculi	.....	.....	.....	.....	.71	.....	.....	.00	.10	.....	.....	.02	.....	.....	.....	.....	.14	.....	.....	.01
277–281	115	Other diseases of liver and gall bladder	1.89	.....	.....	.11	1.42	0.71	.....	.22	6.63	.....	.09	.32	5.74	.....	.....	.11	3.22	.....	.02	.14
283–284	117	Simple peritonitis	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.03	.....	.01	.00
288	119	Acute nephritis	.63	.....	.....	.05	.....	.....	.....	.....	.....	.....	.....	.....	.04	.....	.....	.01	.29	.....	.03	.02
289–291	120	Bright's disease	1.01	.51	.....	.17	.....	.....	0.71	.09	.29	.....	.....	.44	.88	.....	0.44	.04	.65	.22	.10	.13
293–299	122	Other diseases of the kidney and annexa	.....	.....	.....	.....	.....	.....	.....	.....	.39	.....	.....	.02	.....	.....	.....	.....	.25	.03	.01	.02
303–306	124	Diseases of the bladder	1.88	.13	.....	.10	1.42	.....	.....	.09	2.05	.09	.....	.10	.44	.....	.....	.02	1.73	.30	.....	.10
304	124b	Enuresis	1.00	.13	.....	.04	.....	.....	.....	.07	.88	.....	.....	.05	.....	.....	.....	.....	.89	.27	.....	.06
307–309	125	Diseases of the urethra, urinary abscess, etc	2.51	.....	.....	.05	.....	.....	.....	.02	2.73	.....	.....	.04	.....	.....	.....	.....	1.35	.....	.....	.04

310–312	126	Diseases of the prostate	.13			.01													.09			.01
313–319	127	Diseases of the male genital organs (nonvenereal)	4.64			.13	.71			.03	4.39			.13	2.21			.03	3.74	.01		.12
322–323	143	Furuncle and carbuncle	23.34			.37	3.56			.04	24.77			.45	16.33			.32	15.13			.24
324–325	144	Acute abscess and cellulitis	9.66			.29	4.27			.30	13.46			.45	14.56			.30	11.26	.01		.32
352–357	146	Diseases of the bones	2.52	.26		.18					2.83			.19	3.08	0.44		.18	1.98	.08		.15
358–360	147	Diseases of the joints	3.39			.16	3.56			.24	2.93	.09		.20	4.42			.08	3.59	.22		.24
367	149g	Flat foot	.50			.05				.14	1.17	.19		.09					1.63	.89		.17
372	150	Congenital malformations	2.38			.08	.71			.09	5.27			.17					3.08	.05		.10
373–374	154	Senility																		.01		
375	189Aa	Febricula, simple continued, and other fevers of undetermined causation	1.38			.02	6.41			.16	4.39			.13	12.36			.17	2.13			.05
379	189Ba	Under observation, undiagnosed and unknown	1.63			.11	.71			.00	.59			.03	1.77			.02	.93		.03	.03
380	189Bb	Malingering	.75			.08					.10			.00					.38			.02
		AFFECTIONS PRODUCED BY EXTERNAL CAUSES.																				
426–434	155–163	Suicides, all									.10		.19		.44		.88		.17		.50	
435	164	Poisoning by food	.25								11.31		.19		.44				2.17		.03	
436	165a	Venomous bites and stings	.63								1.37				3.97				1.07			
437	165b	Other poisoning (deleterious gases excepted)	.38		0.25						.49		.28		.44				.72		.14	
439	167	Burns (conflagrations excepted)	3.39				2.14				4.49				5.30				3.75	.03		
440	168	Absorption of deleterious gases																	.07		.01	
441	168a	Suffocation, strangulation	.13								.10								.02			
442	169	Drowning, accidental			.13								.38				.88				.56	
443	170	Traumatism by firearms (other than specified)	2.38	.25							1.66		.19		1.77				2.58	.30	.16	
444	170a	Shot by sentry or guard									.20				.44				.05			
445	171	Traumatism by cutting or piercing instruments	13.05				1.42				7.61	.09			13.68				9.86	.08		
446	172	Traumatism by fall	40.52	.13			8.55				37.35	.09	.09		15.89		.44		36.58	.24	.08	
447	173	Traumatism in mines and quarries																	.06			
448	174	Traumatism by machines	.88								.59								.87	.01		
449	175	Traumatism by other crushing	11.42		.13		.71				6.05				3.97				8.78	.33	.18	
450	176	Injuries by animals	8.53								9.66				5.71				12.21	.07	.02	
452	178	Effects of excessive cold																	.62		.03	
453	179	Effects of heat	1.76								3.51				1.32				1.64		.01	
454	180	Effects of lightning													.44				.01			
455	181	Effects of electricity																	.03			
456–458	182-4	Homicides, all									.20		.37				.44		.17		.28	
460	186	Other external violence	35.75	.38			4.99				45.45	.09	.09		27.80		.44		43.55	.26	.08	
462–466		Killed or wounded in action																		.01		
462		By bullet																		.01		

TABLE NO. 76.—*Admissions to sick report, discharges, deaths, and noneffectiveness, expressed in ratios per 1,000 of mean strength, for American troops (enlisted men) on duty at home stations, placed in comparison with the same data for those serving at distant stations, year 1914*—Continued.

Serial No.	International classification.	Causes of admission to sick report.	Hawaii.				Transports.				Philippines.				Vera Cruz.				Army.			
			Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.	Admissions.	Discharges.	Deaths.	Noneffective.
		DISEASES AND INJURIES GROUPED.[1]																				
		General diseases	134.49	2.76	0.88	5.96	183.05	0.71	0.71	12.14	323.21	4.27	1.04	14.75	525.60	0.44	2.21	9.82	207.00	3.38	1.06	9.34
	1–19	Epidemic diseases	46.04	.....	.....	1.63	69.09	.....	.....	2.29	102.21	.....	.09	2.98	104.59	.....	.88	3.46	69.47	.03	.22	2.00
	20–59	Other general diseases	88.45	2.76	.88	4.33	113.96	.71	.71	9.85	221.01	4.27	.95	11.77	421.01	.44	1.32	6.36	137.52	3.35	.84	7.34
		Diseases of the nervous system and organs of special sense	20.20	3.38	.....	.91	11.39	.....	.71	6.07	36.86	4.73	.19	1.49	22.94	2.21	.....	.53	28.37	4.60	.23	2.08
	60–74	Of the nervous system	8.66	3.38	.....	.60	2.85	.....	.71	5.68	17.65	4.36	.19	.99	11.47	1.77	.....	.34	13.61	4.23	.23	1.56
	75	Of the eye and its annexa	8.15	.....	.....	.19	4.27	.....	.....	.34	9.46	.28	.....	.28	4.41	.....	.....	.11	8.68	.22	.....	.32
	76	Of the ear and its annexa	3.39	.....	.....	.12	4.27	.....	.....	.05	9.75	.09	.....	.22	7.06	.44	.....	.08	6.08	.15	.....	.20
	77–85	Diseases of the circulatory system	15.81	.25	.13	.79	4.99	.....	.71	.58	28.77	.19	.38	1.19	23.39	.....	.....	1.11	19.17	.69	.30	.99
	86–98	Diseases of the respiratory system	41.90	.38	.13	1.14	58.40	.....	.....	1.29	55.40	.28	.....	1.44	53.40	.....	.44	1.44	54.18	.34	.24	1.35
	99–118	Diseases of the digestive system	103.37	.13	.....	2.75	106.13	.....	1.42	2.36	189.00	.38	.38	4.33	146.95	.....	.....	2.59	144.35	.37	.36	3.17
	119–127	Diseases of the genito-urinary system	11.04	.63	.....	.50	2.14	.....	.71	.23	10.14	.09	.....	.33	3.97	.....	.44	.10	8.49	.57	.15	.45
	142–145	Diseases of the skin and cellular tissue	49.05	.....	.....	1.15	21.37	.....	.....	.63	73.44	.....	.....	1.83	48.98	.....	.....	1.10	48.49	.11	.....	1.20
	146–149	Diseases of the organs of locomotion	19.70	.38	.....	.83	7.12	.....	.....	.70	18.82	.28	.....	.91	22.51	.88	.....	.62	21.47	1.27	.....	.94
	150	Malformations, etc	2.38	.....	.....	.08	.71	.....	.....	.09	5.27	.....	.....	.17	.....	.....	.....	.....	3.08	.05	.....	.10
	154	Diseases, results of old age	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.01	.....	.....
	189	Ill-defined diseases	4.01	.....	.....	.21	71.94	.....	.....	.85	5.66	.....	.....	.18	14.56	.....	.....	.20	4.86	.....	.03	.12
		Total for disease	401.96	7.89	1.13	14.33	467.24	.71	4.27	24.95	746.61	10.24	1.99	26.60	862.31	3.53	3.09	17.50	539.46	11.39	2.36	19.72
	155–186	External causes	121.31	1.13	.50	4.42	17.81	.....	.....	1.90	131.08	.38	1.80	3.98	82.97	.....	3.09	2.56	126.37	1.60	2.09	4.30
		Total for disease and external causes	523.27	9.02	1.63	18.75	485.04	.71	4.27	26.85	877.69	10.62	3.79	30.58	945.28	3.53	6.18	20.06	665.83	12.99	4.45	24.02

[1] Noneffectiveness for individual external causes not tabulated.

TABLE NO. 79.—*Showing the most important diseases, by departments, in the United States (continental, excluding Alaska), 1914—officers and enlisted men.*

ADMISSIONS, ABSOLUTE NUMBERS.

Diseases.	Eastern Department.	Central Department.	Southern Department.	Western Department.	Recruit depots.	Independent stations.	General hospitals.	Second tactical division.	Cavalry division, Mexican border.	Total.
1. Alcoholismus, acutus, including delirium tremens	321	22	63	89	63	35	23	107	32	755
2. Appendicitis, typhlitis, perityphlitis	119	30	53	48	32	11	13	92	60	458
3. Bronchitis acuta	487	124	86	173	803	62	13	298	175	2,221
4. Cholera Asiatica										
5. Cholera nostras	2									2
6. Diphtheria	5		3	16	11	1	2			38
7. Dysenteria	18	9	7	6	9		2	24	25	100
8. Erysipelas	11	2	6	4	5			1	6	35
9. Febris intermittens (malaria)	165	22	58	25	73	15	4	56	179	597
10. Febris recurrens										
11. Fractura ossium	239	47	110	117	57	24	8	121	119	842
12. Gonorrhea	873	181	300	362	445	39	28	580	347	3,155
13. Hernia	78	8	16	35	86	2	4	35	23	287
14. Influenza	234	88	62	101	67	45	10	119	96	822
15. Insolatio (Hitzschlag coup de chaleur)		1		1				4	1	7
16. Luxationes articulorum	47	11	24	20	19	2	1	29	32	185
17. Meningitis cerebrospinalis, epidemica	1		1	2	6			4		14
18. Morbilli	60	19	20	81	192	1	1	62	16	452
19. Parotitis epidemica	173	35	7	76	157	13	2	64	23	550
20. Pleuritis	59	8	14	13	9	9	7	15	31	165
21. Pneumonia crouposa sive lobaris	35	5	19	7	51	2	3	19	24	165
22. Rheumatismus articulorum	121	35	25	40	64	8	9	51	71	424
23. Scarlatina	1	1			18		3	3	2	28
24. Scorbutus										
25. Syphilis	374	61	151	99	135	13	35	204	71	1,143
26. Trachoma	1		1	1	2		1		1	7
27. Tuberculosis pulmonum	41	8	18	26	11		15	19	15	153
28. Tuberculosis ceterorum organorum	6	2	3	4	3			2	2	22
29. Typhus abdominalis	3				4					7
30. Typhus exanthematicus										
31. Ulcus molle	259	8	115	47	118	10	10	450	209	1,226
32. Variola			5	1					1	7
33. Morbi auris	66	24	29	37	58	2	9	49	48	322
34. Morbi cordis	30		11	9	15	3	9	7	11	95
35. Morbi cutis	349	62	90	93	191	21	13	143	115	1,077
36. Morbi mentis	51	9	16	40	37	2	17	38	28	238
37. Morbi oculi	157	36	58	72	58	17	12	75	74	559
38. Morbi systemat., urin, et sexual (excluding venerie et syphilis)	158	39	48	57	68	17	17	69	52	525

TABLE NO. 79.—*Showing the most important diseases, by departments, in the United States (continental, excluding Alaska), 1914—officers and enlisted men*—Continued.

ADMISSIONS PER 1,000 OF MEAN STRENGTH, PROPORTIONATE NUMBERS.

Diseases.	Eastern Department.	Central Department.	Southern Department.	Western Department.	Recruit depots.	Independent stations.	General hospitals.	Second tactical division.	Cavalry division, Mexican border.	Total.
1. Alcoholismus, acutus, including delirium tremens	16.15	5.92	14.00	10.01	10.26	18.46	41.59	10.68	3.65	11.73
2. Appendicitis, typhlitis, perityphlitis	5.99	8.07	11.78	5.40	5.21	5.80	23.51	9.19	6.84	7.12
3. Bronchitis acuta	24.51	33.35	19.12	19.46	130.76	32.70	23.51	29.76	19.95	34.51
4. Cholera Asiatica										
5. Cholera nostras	.10									.03
6. Diphtheria	.25		.67	1.80	1.79	.53	3.62			.59
7. Dysenteria	.91	2.42	1.56	.67	1.47		3.62	2.40	2.85	1.55
8. Erysipelas	.55	.54	1.33	.45	.81			.10	.68	.54
9. Febris intermittens (malaria)	8.30	5.92	12.89	2.81	11.89	7.91	7.23	5.59	20.40	9.28
10. Febris recurrens										
11. Fractura ossium	12.03	12.64	24.45	13.16	9.28	12.66	14.47	12.08	13.56	13.08
12. Gonorrhea	43.93	48.68	66.68	40.72	72.46	20.57	50.64	57.91	39.56	49.03
13. Hernia	3.93	2.15	3.56	3.94	14.00	1.05	7.23	3.49	2.62	4.46
14. Influenza	11.77	23.67	13.78	11.36	10.91	23.73	18.08	11.88	10.94	12.77
15. Insolatio (Hitzschlag coup de chaleur)		.27		.11				.40	.11	.11
16. Luxationes articulorum	2.37	2.96	5.33	2.25	3.09	1.05	1.81	2.90	3.65	2.87
17. Meningitis cerebrospinalis, epidemica	.05		.22	.22	.98			.40		.22
18. Morbilli	3.02	5.11	4.45	9.11	31.27	.53	1.81	6.19	1.82	7.02
19. Parotitis epidemica	8.71	9.41	1.56	8.55	25.57	6.86	3.62	6.39	2.62	8.55
20. Pleuritis	2.97	2.15	3.11	1.46	1.47	4.74	12.66	1.50	3.53	2.56
21. Pneumonia crouposa sive lobaris	1.76	1.34	4.22	.79	8.30	1.05	5.42	1.90	2.74	2.56
22. Rheumatismus articulorum	6.09	9.41	5.56	4.50	10.42	4.22	16.27	5.09	8.09	6.59
23. Scarlatina	.05	.27			2.93		5.42	.30	.23	.44
24. Scorbutus										
25. Syphilis	18.82	16.41	33.56	11.14	21.98	6.86	63.30	20.37	8.09	17.76
26. Trachoma	.05		.22	.11	.33		1.81		.11	.11
27. Tuberculosis pulmonum	2.06	2.15	4.00	2.92	1.79		27.12	1.90	1.71	2.38
28. Tuberculosis ceterorum organorum	.30	.54	.67	.45	.49			.20	.23	.34
29. Typhus abdominalis	.15				.65					.11
30. Typhus exanthematicus										
31. Ulcus molle	13.03	2.15	25.56	5.29	19.22	5.27	18.08	44.93	23.82	19.05
32. Variola			1.11	.11					.11	.11
33. Morbi auris	3.32	6.45	6.45	4.16	9.44	1.05	16.27	4.89	5.47	5.00
34. Morbi cordis	1.51		2.44	1.01	2.44	1.58	16.27	.70	1.25	1.48
35. Morbi cutis	17.56	16.67	20.00	10.46	31.10	11.08	23.51	14.28	13.11	16.73
36. Morbi mentis	2.57	2.42	3.56	4.50	6.03	1.05	30.74	3.79	3.1[illegible]	3.70
37. Morbi oculi	7.90	9.68	12.89	8.10	9.44	8.97	21.70	7.49	8.44	8.69
38. Morbi systemat., urin, et sexual (excluding venerie et syphilis)	7.95	10.49	10.67	6.41	11.07	8.97	30.74	6.89	5.93	8.16

TABLE No. 80.—*Comparative figures, enlisted American troops, Army, 1910–1914.*

ABSOLUTE NUMBERS.

Army.	Mean strength.	Admissions to sick report.		Discharges on certificate of disability.		Deaths.		Total losses.		Total days.				Constantly noneffective.			
		From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.		From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
										Total.	In hospital.	Total.	In hospital.	Total.	In hospital.	Total.	In hospital.
1914.....	87,228	58,079	35,502	1,145	921	392	195	1,537	1,116	764,883	684,082	467,890	428,245	2,095.57	1,874.20	1,281.89	1,173.28
1913.....	80,766	54,257	33,459	1,082	865	397	202	1,479	1,067	717,149	659,086	447,061	420,217	1,964.79	1,805.72	1,224.82	1,151.28
1912.....	78,367	64,487	39,952	1,069	844	381	169	1,450	1,013	862,221	790,213	494,236	459,521	2,356.80	2,159.05	1,350.37	1,256.52
1911.....	72,748	68,073	39,364	1,011	799	348	181	1,359	980	883,646	798,382	465,853	426,534	2,420.95	2,187.35	1,276.31	1,195.98
1910.....	71,534	67,940	39,754	1,007	776	320	165	1,327	941	938,210	850,301	483,979	442,868	2,570.41	2,329.59	1,325.97	1,213.34

TABLE No. 80.—*Comparative figures, enlisted American troops, Army, 1910–1914*—Continued.

PROPORTIONATE NUMBERS.

Army.	Mean strength.	Ratio per 1,000 of mean strength.												Average number of days lost.			
		Admissions to sick report.		Discharges on certificate of disability.		Deaths.		Total losses.		Noneffective from sickness.				From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.	
		From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.	Excluding injuries, venereal diseases, vaccinia, and alcoholism.	From all causes.		Excluding injuries, venereal diseases, vaccinia, and alcoholism.		For each soldier.	For each case.	For each soldier.	For each case.
										Total.	In hospital.	Total.	In hospital.				
1914	87,228	665.83	407.00	12.99	10.45	4.45	2.21	17.44	13.45	24.02	21.49	14.70	13.45	8.77	13.17	5.36	13.18
1913	80,766	671.78	414.27	13.24	10.59	4.86	2.47	18.10	13.06	24.33	22.36	15.17	14.26	8.88	13.22	5.53	13.36
1912	78,267	823.94	510.46	13.43	10.60	4.79	2.12	18.22	12.72	30.10	27.58	17.25	16.04	11.02	13.37	6.31	12.37
1911	72,748	935.74	541.10	13.85	10.94	4.77	2.48	18.62	13.42	33.28	30.07	17.54	16.06	12.15	12.98	6.40	11.83
1910	71,534	949.76	555.74	14.02	10.81	4.46	2.30	18.48	13.11	35.93	32.57	18.53	16.96	13.12	13.81	6.77	12.17

TABLE No. 81.—*Ratios per 1,000 of mean strength for "total admissions" and for "case admissions" for enlisted American troops in the Army (as a whole), in the United States (continental), excluding Alaska, and in the Philippine Islands, for the years 1904 to 1911, for disease, external causes, and all causes.*

Year.	Enlisted American troops.	Army.		United States (continental), excluding Alaska.		Philippine Islands.	
		Total admissions.	Case admissions.	Total admissions.	Case admissions.	Total admissions.	Case admissions.
1904	Diseases	1,114	1,002	1,049	951	1,473	1,293
	External causes	241	228	257	242	215	204
	All causes	1,355	1,230	1,306	1,193	1,688	1,497
1905	Diseases	1,058	975	998	921	1,387	1,260
	External causes	238	226	252	239	213	207
	All causes	1,296	1,201	1,250	1,160	1,600	1,467
1906	Diseases	1,053	987	944	879	1,494	1,409
	External causes	224	216	236	226	206	202
	All causes	1,277	1,203	1,180	1,105	1,700	1,611
1907	Diseases	1,005	926	956	885	1,260	1,153
	External causes	213	206	216	208	223	216
	All causes	1,218	1,132	1,172	1,093	1,483	1,369
1908	Diseases	963	891	922	860	1,208	1,097
	External causes	225	217	227	219	232	222
	All causes	1,188	1,108	1,149	1,079	1,440	1,319
1909	Diseases	866	791	822	750	1,156	1,062
	External causes	197	190	202	195	192	185
	All causes	1,063	981	1,024	945	1,348	1,247
1910	Diseases	766	707	715	662	1,048	956
	External causes	184	178	184	178	195	188
	All causes	950	885	899	840	1,243	1,144
1911	Diseases	770	718	726	680	1,028	947
	External causes	166	161	162	157	190	185
	All causes	936	879	888	837	1,218	1,132

INTERNATIONAL MILITARY MEDICAL STATISTICS FOR THE YEAR 1914.

These tables are those agreed upon at the International Commission for the Unification of the Medical Statistics of Armies, held at Budapest in 1894, at Madrid in 1903, and modified by the last meeting held at Berlin in 1907. They are calculated for the United States Army proper (white and colored) and include enlisted men only. Dispositions include cases remaining from last year. Deaths include suicides and accidents. Days lost include those lost this year by cases remaining from last year.

Table I shows in absolute numbers, by divisions, the mean strength of the command, the admissions to quarters, to hospital, and total admissions; the disposition of the sick, total, and the number returned to duty, died, and otherwise disposed of, and the total number of days' sickness.

Table II gives the same data in ratios per 1,000, and also shows the days lost per soldier and per admission.

Table III shows, by arms of service, the mean strength, the total admissions, and those admitted to hospital only, the total dispositions, and the number of those returned to duty, and the number that died.

Table IV gives the same data as Table III by months.

Table V shows for each of the larger garrisons the mean strength, admissions to hospital, total admissions, and the deaths.

Table VI shows for each of the 38 diseases or disease groups agreed upon by the international commission, the number remaining under treatment at the commencement and close of the current year, the admissions and dispositions for the year, the total sick days, and the average number of days per case.

Table VII shows the admissions, by arms of service, for the diseases and disease groups referred to in Table VI.

Table VIII shows the same data as Table VII by months.

Table IX shows deaths by rank, by length of service, and by age.

Table X shows the same data as Table IX for discharges for physical disability.

INTERNATIONAL TABLE I.—*Movement of sick by Army corps (departments).*

ABSOLUTE NUMBERS (ENLISTED MEN).

	Mean strength.	Admitted sick.			Sick disposed of.				Total days sick.
		Total.	To hospital.	To quarters.	Returned to duty (recovered).	Died.	Otherwise disposed of.	Total.	
United States (excluding Alaska):									
Eastern Department	18,936	10,745	9,607	1,138	9,768	70	253	10,091	99,171
Central Department	3,457	2,436	1,774	662	2,299	19	65	2,383	25,083
Southern Department (excluding Cavalry division)	4,298	3,372	3,056	316	4,044	45	276	4,365	89,376
Western Department	8,481	3,707	3,063	644	2,537	28	87	2,652	28,876
Second tactical division	9,540	5,482	3,073	2,409	4,688	32	109	4,829	56,127
Mexican border (Cavalry division)	8,404	4,840	2,314	2,526	3,449	26	26	3,501	27,516
Independent stations	1,704	988	460	528	904	6	16	926	7,964
Recruit depots	6,028	6,555	6,108	447	6,174	28	340	6,542	63,290
General hospitals	514	523	495	28	1,740	44	592	2,376	125,904
Total[1]	61,362	38,648	29,950	8,698	35,603	298	1,764	37,665	523,307
Alaska[1]	915	387	346	41	358	8	14	380	3,515
Canal Zone, Panama[1]	2,010	1,920	1,461	459	1,712	7	47	1,766	27,367
Hawaiian Department	7,971	4,171	3,766	405	4,011	13	119	4,143	54,544
China[1]	1,047	1,131	941	190	1,051	6	20	1,077	11,344
Philippine Department	10,253	8,999	8,649	350	8,446	40	324	8,810	114,455
Army transports	1,404	681	583	98	460	6	4	470	13,761
Expeditionary forces, Vera Cruz, Mexico	2,266	2,142	1,026	1,116	1,418	14	38	1,470	16,590
Army	87,228	58,079	46,722	11,357	53,059	392	2,330	55,781	764,883

[1] Separated from the department to which they belong for purposes of comparison.

INTERNATIONAL TABLE II.—*Movement of sick, by Army corps (departments).*

PROPORTIONATE NUMBERS (ENLISTED MEN).

	In 1,000 of mean strength.			In 1,000 disposed of.			Days lost	
	Total admissions.	Admissions to hospital.	Deaths.	Returned to duty (recovered).	Died.	Otherwise disposed of.	Per soldier.	Per admission.
United States (excluding Alaska):								
Eastern Department	567.44	507.34	3.70	967.99	6.94	25.07	5.24	9.23
Central Department	704.66	513.16	5.50	964.75	7.97	27.28	7.26	10.30
Southern Department	784.55	711.03	10.47	926.46	10.31	63.23	20.80	26.51
Western Department	437.09	361.16	3.30	956.63	10.56	32.81	3.40	7.79
Second tactical division	574.63	322.12	3.35	970.80	6.63	22.57	5.88	10.24
Mexican border (Cavalry division)	575.92	275.35	3.09	985.15	7.43	7.43	3.27	5.68
Independent stations	579.81	269.95	3.52	976.24	6.48	17.28	4.67	8.06
Recruit depots	1,087.43	1,013.27	4.65	943.75	4.28	51.97	10.50	9.66
Total	629.84	488.09	4.82	945.25	7.91	46.83	8.53	13.54
Alaska[1]	422.95	378.14	8.74	942.11	21.05	36.84	3.84	9.08
Canal Zone, Panama[1]	955.22	726.86	3.33	969.42	3.96	26.61	13.62	14.25
Hawaiian Department	523.27	472.46	1.63	968.14	3.14	28.72	6.84	13.08
China[1]	1,080.23	898.76	5.73	975.85	5.57	18.57	10.83	10.03
Philippine Department	877.69	843.56	3.79	958.69	4.54	36.78	11.16	12.72
Army transports	485.04	415.24	4.27	978.72	12.77	8.51	9.80	20.21
Expeditionary force, Vera Cruz, Mexico	945.28	452.78	6.18	964.63	9.52	25.85	7.32	7.75
Army	665.83	535.63	4.45	951.20	7.03	41.77	8.77	13.17

[1] Separated from the department to which they belong for purposes of comparison.

INTERNATIONAL TABLE III.—*Movement of sick, by arms of service—Army—Enlisted men.*

Arms of service.	Mean strength.	Absolute numbers.					Proportionate numbers.				
		Sick admissions.		Sick disposed of.			Per 1,000 of mean strength.			Per 1,000 of sick disposed of.	
		Total.	To hospitals.	Total.	Fit for duty (recovered).	Deaths.	Total sick admissions.	Admissions to hospitals.	Deaths.	Fit for duty (recovered).	Deaths.
Infantry	30,308	20,079	15,578	18,860	17,833	134	662.50	513.99	4.37	945.55	7.11
Cavalry	13,877	10,444	8,015	10,237	9,842	74	752.61	577.57	5.27	961.41	7.23
Coast Artillery	17,450	9,773	8,435	9,468	8,999	71	560.06	483.38	4.02	950.47	7.51
Field Artillery	4,917	4,107	3,111	3,902	3,742	11	835.27	632.70	2.21	959.00	2.82
Engineers	1,692	1,235	854	1,150	1,074	7	729.91	504.73	4.09	933.91	6.09
Ordnance	717	404	125	394	386	3	563.46	174.34	4.14	979.70	7.61
Signal Corps	1,240	658	523	599	563	4	530.65	421.77	3.19	939.90	6.68
Hospital Corps	3,742	2,240	1,952	2,193	2,073	23	598.62	521.65	6.08	945.28	10.49
Others	13,285	9,139	8,129	8,978	8,547	65	687.92	611.89	4.84	951.99	7.24
Total	87,228	58,079	46,722	55,781	53,059	392	665.83	535.63	4.45	951.20	7.03

INTERNATIONAL TABLE IV.—*Movement of sick, by months (enlisted men).*

AMERICAN TROOPS AT HOME.

Month.	Mean strength.	Absolute numbers.				Proportional numbers.				
		Sick admissions.		Sick disposed of.			Per 1,000 of mean strength.			Per 1,000 sick disposed of.	
		Total.	To hospital.	Total.	Fit for duty (recovered).	Deaths.	Total sick admissions.	Admissions to hospital.	Deaths.	Fit for duty (recovered).	Deaths.
January	62,128	3,632	3,018	3,362	3,199	23	58.46	48.58	0.36	951.51	6.84
February	61,595	3,578	2,955	3,430	3,277	20	58.09	47.98	.32	955.39	5.83
March	61,112	4,039	3,344	3,958	3,785	28	66.09	54.72	.45	956.29	7.07
April	59,824	3,302	2,768	3,439	3,255	28	55.20	46.27	.45	946.50	8.14
May	60,470	3,178	2,442	3,088	2,914	32	52.56	40.38	.53	943.65	10.36
June	59,637	3,177	2,400	3,062	2,874	25	53.28	40.25	.42	938.60	8.17
July	60,099	3,022	2,241	3,022	2,859	30	50.29	37.29	.50	946.06	9.93
August	59,690	2,920	2,197	2,897	2,737	25	48.92	36.80	.42	944.77	8.63
September	60,811	2,854	2,130	2,778	2,611	23	46.93	35.02	.38	939.88	8.28
October	62,149	2,929	2,156	2,866	2,693	25	47.13	34.69	.40	939.63	8.72
November	62,406	2,762	1,992	2,738	2,553	17	44.26	31.92	.27	932.43	6.21
December	66,427	3,255	2,307	3,025	2,846	22	49.00	34.73	.33	940.83	7.27
Total	61,362	38,648	29,950	37,665	35,603	298	629.84	488.09	4.82	945.25	7.91

AMERICAN TROOPS IN THE PHILIPPINE ISLANDS.

January	10,731	692	669	726	696	2	64.49	62.35	0.18	958.66	2.76
February	10,839	580	523	549	512	4	53.51	48.25	.37	932.61	7.29
March	10,688	879	857	791	757	6	82.23	80.17	.54	957.02	7.59
April	10,447	762	730	796	773	1	72.93	69.87	.09	971.11	1.26
May	10,697	789	760	776	743	3	73.75	71.04	.28	957.48	3.87
June	10,709	745	713	725	695	7	69.57	66.58	.68	958.62	9.66
July	9,809	823	811	771	749	4	83.90	82.68	.40	971.47	5.19
August	9,552	789	760	821	790	3	82.61	79.57	.31	962.24	3.65
September	10,120	670	656	639	611	3	66.21	64.83	.30	956.18	4.69
October	9,227	695	656	729	689	3	75.32	71.10	.27	945.13	4.12
November	9,709	743	712	695	668	2	76.55	73.35	.19	961.15	2.88
December	10,505	832	802	792	763	2	79.20	76.34	.18	963.38	2.53
Total	10,253	8,999	8,649	8,810	8,446	40	877.69	843.56	3.79	958.68	4.54

INTERNATIONAL TABLE V.—*Movement of sick in the larger garrisons—Officers and enlisted men, year 1914.*

Garrisons.	Mean strength.	Total admissions.		Admissions to hospital.		Deaths.	
		Absolute numbers.	Per 1,000 of mean strength.	Absolute numbers.	Per 1,000 of mean strength.	Absolute numbers.	Per 1,000 of mean strength
Columbus Barracks, Ohio	1,511	1,403	928.52	1,344	889.48	6	3.97
Jefferson Barracks, Mo	1,491	1,123	753.19	1,103	739.77	9	6.04
Fort Slocum, N. Y	1,461	2,291	1,568.10	2,171	1,485.97	5	3.42
Presidio of San Francisco, Cal	1,249	762	610.09	622	498.00	2	1.60
Fort Monroe, Va	1,132	307	271.20	246	217.30	4	3.53
Fort Sam Houston, Tex	1,096	858	782.85	812	740.88	12	10.95
Fort McDowell, Cal	1,028	736	715.95	681	662.45	6	5.84
Vancouver Barracks, Wash	1,023	411	401.76	359	350.93	3	2.93
Fort Sill, Okla	1,013	611	603.16	484	477.79	3	2.96
Fort Winfield Scott, Cal	956	183	191.42	168	175.73	2	2.09
Fort Ethan Allen, Vt	932	780	836.91	740	793.99	6	6.44
West Point, N. Y	827	354	428.05	264	319.23	2	2.42
Plattsburg Barracks, N. Y	780	500	641.03	435	557.69	5	6.41
Fort Hancock, N. J	771	340	440.98	321	416.34	1	1.30
Presidio of Monterey, Cal	768	311	404.95	274	356.77	4	5.21
Washington Barracks, D. C	725	501	691.03	327	451.03	3	4.14
Fort Totten, N. Y	723	364	503.46	326	450.90	3	4.15
Fort Myer, Va	702	550	783.48	485	690.88	1	1.42
Fort Bliss, Tex	672	807	1,200.89	760	1,130.95	13	19.35
Fort Terry, N. Y	671	319	475.41	287	427.72	1	1.49
Fort H. G. Wright, N. Y	668	338	505.99	319	477.55	.....	.....
Fort Riley, Kans	656	319	486.28	264	402.44	2	3.05
Fort Leavenworth, Kans	653	484	741.19	405	620.21	4	6.13
Fort Logan, Colo	650	1,059	1,629.23	815	1,253.85	2	3.08
Fort Worden, Wash	644	262	406.83	233	361.80	2	3.11
Fort McKinley, Me	627	325	518.34	284	452.95	4	6.38
Fort Barrancas, Fla	616	297	482.14	266	431.82	3	4.87
Fort Hamilton, N. Y	610	203	332.79	172	281.97	3	4.92
Madison Barracks, N. Y	601	269	447.59	256	425.96	.....	.....
Fort Wm. H. Seward, Alaska	273	168	615.38	159	582.42	3	10.99
Fort Gibbon, Alaska	249	98	393.57	77	309.24	3	12.05
Fort Liscum, Alaska	134	44	328.36	42	313.43	.....	.....
Fort Davis, Alaska	115	47	408.70	40	347.83	.....	.....
Fort St. Michael, Alaska	105	28	266.67	26	247.62	.....	.....
Schofield Barracks, Hawaii	5,118	2,842	555.30	2,576	503.32	10	1.95
Fort Shafter, Hawaii	1,756	823	468.68	745	424.26	3	1.71
Fort Kamehameha, Hawaii	330	225	681.82	95	287.88	1	3.03
Fort Ruger, Hawaii	246	82	333.33	75	304.88	.....	.....
Fort De Russey, Hawaii	182	55	302.20	22	120.88	.....	.....
Fort Mills, P. I	3,307	1,886	570.30	1,798	543.70	10	3.02
Fort William McKinley, P. I	2,644	2,817	1,065.43	2,727	1,031.39	11	4.16
Camp Stotsenburg, P. I	1,652	1,446	875.30	1,349	816.59	2	1.21
Camp McGrath, P. I	766	689	899.48	648	845.95	1	1.31
Augur Barracks, P. I	749	663	885.18	644	859.81	5	6.68
Cuartel de Espana, P. I	659	677	1,027.32	612	928.68	1	1.52
Ludlow Barracks, P. I	623	852	1,367.58	840	1,348.32	4	6.42
Camp Keithley, P. I	543	263	484.35	243	447.51	3	5.53
Camp Eldridge, P. I	424	375	884.43	353	832.55	4	9.43
Pettit Barracks, P. I	412	306	742.72	293	711.16	1	2.43
Warwick Barracks, P. I	400	258	645.00	251	627.50	1	2.50
Regan Barracks, P. I	352	335	951.70	321	911.93	3	8.52

INTERNATIONAL TABLE VI.—*Movement of sick according to most important diseases, Army (American troops), enlisted men, 1914.*

	Absolute numbers.									Proportionate numbers.					
	Remaining at close of 1913.	Admitted, 1914.	Total remaining and admitted.	Disposed of, 1914.				Remaining at close of 1914.	Total days sick in 1914.	Per 1,000 of mean strength.		Per 1,000 disposed of.			Average days of treatment.
				Fit for duty.	Died.	Otherwise.	Total.			Admissions.	Deaths.	Fit for duty.	Died.	Otherwise.	
1. Alkoholismus acutus, including delirium tremens	8	1,184	1,192	1,141	7	36	1,184	11	4,309	13.57	0.08	964	5.91	30.41	3.64
2. Appendicitis, typhilitis, and perityphilitis	40	704	744	654	13	32	699	48	18,789	8.07	.15	936	18.60	45.78	26.68
3. Bronchitis acuta	53	2,832	2,885	2,795	.....	36	2,831	55	16,894	32.47	.....	987	.....	12.72	5.96
4. Cholera Asiatica	.....	.....	.....	1	.....	.....	1	.....	17	.....	.....	1,000	.....	.....	17.00
5. Cholera nostras	.....	2	2	2	.....	.....	2	.....	6	.02	.....	1,000	.....	.....	3.00
6. Diphtheria et croup	5	44	49	42	.....	4	46	3	1,257	.50	.....	913	.....	86.96	28.57
7. Dysenteria	13	290	303	272	4	15	291	11	6,650	3.32	.05	935	13.75	51.55	22.93
8. Erysipelas	.....	40	40	37	1	1	39	1	650	.46	.01	949	25.64	25.64	16.25
9. Febris intermittens (malaria)	13	1,111	1,124	1,076	.....	31	1,107	17	8,844	12.73	.....	972	.....	28.00	7.96
10. Febris recurrens	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. Fractura ossium	122	1,113	1,235	1,032	15	94	1,141	118	47,052	12.76	.17	904	13.15	82.38	42.28
12. Gonorrhea	197	5,076	5,273	3,621	.....	138	3,759	1,300	71,347	58.20	.....	963	.....	36.71	14.06
13. Hernia	27	373	400	339	3	30	372	30	13,887	4.28	.03	911	8.06	80.65	37.21
14. Influenza	25	1,072	1,097	1,064	.....	11	1,075	22	6,563	12.29	.....	990	.....	10.23	6.12
15. Insolatio (Hitzschlag coup de chaleur)	.....	9	9	9	.....	.....	9	.....	44	.10	.....	1,000	.....	.....	4.89
16. Luxationes articulorum	11	221	232	209	2	12	223	13	3,960	2.53	.02	937	8.97	53.81	17.92
17. Meningitis cerebrospinalis epidemica	1	17	18	8	6	5	19	1	679	.19	.07	421	315.79	263.16	39.94
18. Morbilli	6	550	556	524	8	14	546	9	10,113	6.31	.09	960	14.65	25.64	18.38
19. Parotitis epidemica	9	776	785	749	.....	28	777	10	12,016	8.90	.....	964	.....	36.04	15.49
20. Pleuritis	9	233	242	218	.....	15	233	12	5,100	2.67	.....	936	.....	64.38	21.89
21. Pneumonia crouposa sive lobaris	12	196	208	155	15	25	195	14	5,635	2.25	.17	795	76.92	128.21	28.75
22. Rheumatismus articulorum	27	495	522	464	.....	27	491	30	12,620	5.67	.....	945	.....	54.98	25.50
23. Scarlatina	.....	29	29	21	1	2	24	4	840	.33	.01	875	41.67	83.34	28.97
24. Scorbutus	.....	1	1	1	.....	.....	1	.....	5	.01	.....	1,000	.....	.....	5.00
25. Syphilis	121	2,007	2,128	1,704	5	129	1,838	84	43,197	23.01	.06	927	2.72	70.19	21.53
26. Trachoma	.....	12	12	8	.....	4	12	.....	534	.14	.....	667	.....	333.33	44.50
27. Tuberculosis pulmonum [1]	140	260	400	44	23	187	254	140	53,082	2.98	.26	173	90.56	736.22	204.15
28. Tuberculosis ceterorum organorum	10	32	42	12	18	16	46	5	3,368	.37	.21	261	391.30	347.83	105.25
29. Typhus abdominalis	3	7	10	6	3	.....	9	1	423	.08	.03	667	333.33	.....	60.43
30. Typhus exanthematicus	.....	1	1	1	.....	.....	1	.....	53	.01	.....	1,000	.....	.....	53.00
31. Ulcus molle	92	2,572	2,664	1,620	.....	71	1,691	80	36,024	29.49	.....	958	.....	41.99	36.01
32. Variola	.....	7	7	6	1	.....	7	.....	76	.08	.01	857	142.86	.....	10.87
33. Morbi auris	9	530	539	496	.....	28	524	14	6,452	6.08	.....	947	.....	53.43	12.17
34. Morbi cordis [2]	9	138	147	62	17	60	139	15	5,447	1.58	.19	446	122.30	431.65	39.47
35. Morbi cutis [3]	31	1,508	1,539	1,462	.....	33	1,495	44	15,580	17.29	.....	978	.....	22.08	10.47
36. Morbi mentis	62	365	427	45	3	290	338	103	30,040	4.18	.04	133	8.88	857.99	82.30
37. Morbi oculi	19	757	776	710	.....	39	749	27	10,038	8.68	.....	948	.....	52.07	13.25
38. Morbi systemat. urin. et sexual (excluding venerie et syphilis)	32	741	773	660	13	70	743	30	14,241	8.49	.15	888	17.50	94.21	19.22

[1] Includes tuberculosis of the larynx.

[2] Includes pericarditis and endocarditis.

[3] Diseases of the skin proper only.

INTERNATIONAL TABLE VII.—*Most important diseases, by arms of service (enlisted men), 1914.*

Diseases of the international nosological table.	Absolute numbers—Admissions by arms of service.									Proportionate numbers—Admissions per 1,000 of mean strength.								
	Infantry.	Cavalry.	Coast Artillery.	Field Artillery.	Engineers.	Ordnance.	Signal Corps.	Hospital Corps.	Others.	Infantry.	Cavalry.	Coast Artillery.	Field Artillery.	Engineers.	Ordnance.	Signal Corps.	Hospital Corps.	Others.
1. Alkoholismus acutus, including delirium tremens	457	80	256	50	48	21	15	116	141	15.08	5.76	14.67	10.17	28.37	29.29	12.10	31.00	10.61
2. Appendicitis typhilitis and perityphilitis	262	129	112	54	15	4	7	54	67	8.65	9.30	6.42	10.98	8.87	5.58	5.65	14.43	5.94
3. Bronchitis acuta	818	385	376	147	61	33	22	100	890	26.99	27.74	21.55	29.90	36.05	46.03	17.74	26.73	66.99
4. Cholera Asiatica																		
5. Cholera nostras			2									.11						
6. Diphtheria et croup	14	6	6	1				5	12	.46	.43	.34	.20				1.34	.90
7. Dysenteria	151	59	12	13	13	2	4	21	24	4.98	3.60	.69	2.64	7.68	2.79	3.23	5.61	1.81
8. Erysipelas	14	7	7	3				3	6	.46	.50	.40	.61				.80	.45
9. Febris intermittens (malaria)	382	203	202	85	76	4	12	42	105	12.61	14.63	11.58	17.29	44.92	5.58	9.68	11.22	7.90
10. Febris recurrens																		
11. Fractura ossium	346	300	178	100	15	6	18	35	115	11.42	21.62	10.20	20.34	8.87	8.37	14.52	9.35	8.66
12. Gonorrhea	2,176	721	765	399	125	14	74	186	616	71.80	51.96	43.84	81.15	73.88	19.53	59.68	49.71	46.37
13. Hernia	114	43	67	9	3	2	4	18	113	3.76	3.10	3.84	1.83	1.77	2.79	3.23	4.81	8.51
14. Influenza	404	204	194	45	8	16	21	72	108	13.33	14.70	11.12	9.15	4.73	22.32	16.94	19.24	8.13
15. Insolatio (Hitzschlag, coup de chaleur)	2	3	1	3						.07	.22	.06	.61					
16. Luxationes articulorum	79	51	43	10	4	1	3	6	24	2.61	3.67	2.46	2.03	2.36	1.39	2.42	1.60	1.81
17. Meningitis cerebrospinalis epidemica	7	1		2				1	6	.23	.07		.41				.27	.45
18. Morbilli	169	45	61	26	1		3	17	225	5.58	3.24	3.67	5.29	.59		2.42	4.54	16.94
19. Parotitis epidemica	243	62	214	19	23	3	11	16	185	8.02	4.47	12.26	3.86	13.59	4.18	8.87	4.28	13.93
20. Pleuritis	95	37	32	16	12	2	2	17	20	3.14	2.67	1.83	3.25	7.09	2.79	1.61	4.54	1.51
21. Pneumonia crouposa sive lobaris	51	40	24	12	2		1	6	60	1.68	2.88	1.38	2.44	1.18		.81	1.69	4.52
22. Rheumatismus articulorum	137	103	108	17	7	2	5	18	98	4.52	7.42	6.19	3.46	4.14	2.79	4.03	4.81	7.38
23. Scarlatina	4	2	1	3				2	17	.13	.14	.06	.61				.53	1.28
24. Scorbutus	1									.03								
25. Syphilis	857	330	300	154	53	8	21	82	202	28.28	23.78	17.19	31.32	31.33	11.16	16.94	21.92	15.21
26. Trachoma	5	2	1		1			1	2	.17	.14	.06		.59			.27	.15
27. Tuberculosis pulmonum[1]	106	26	63	13	3		5	18	26	3.50	1.87	3.61	2.64	1.77		4.03	4.81	1.96

[1] Including tuberculosis of the larynx.

INTERNATIONAL TABLE VII.—*Most important diseases, by arms of service (enlisted men), 1914*—Continued.

Diseases of the international nosological table.	Absolute numbers—Admissions by arms of service.									Proportionate numbers—Admissions per 1,000 of mean strength.								
	Infantry.	Cavalry.	Coast Artillery.	Field Artillery.	Engineers.	Ordnance.	Signal Corps.	Hospital Corps.	Others.	Infantry.	Cavalry.	Coast Artillery.	Field Artillery.	Engineers.	Ordnance.	Signal Corps.	Hospital Corps.	Others.
28. Tuberculosis ceterorum organorum	13	7	6	.....	.....	.....	1	.....	5	0.43	0.50	0.34	.....	.....	.....	0.81	.....	0.38
29. Typhus abdominalis	.....	.....	1	.....	.....	.....	.....	2	4	.....	.....	.06	.....	.....	.....	.....	0.53	.30
30. Typhus exanthematicus	1	.....	.....	.....	.....	.....	.....	.....	.....	.03	.....	.....	.....	.....	.....	.....	.....	.....
31. Ulcus molle	1,456	311	267	191	69	2	26	77	173	48.04	22.41	15.30	38.84	40.78	2.79	20.97	20.58	13.02
32. Variola	.....	2	.....	4	.....	.....	1	.....	.....	.....	.14	.....	.81	.....	.....	.81	.....	.....
33. Morbi auris	235	68	83	32	11	.....	6	24	71	7.75	4.90	4.76	6.51	6.50	.....	4.84	6.41	5.34
34. Morbi cordis	54	22	26	4	.....	.....	1	7	24	1.78	1.59	1.49	.81	.....	.....	.81	1.87	1.81
35. Morbi cutis	467	287	314	115	27	10	12	40	236	15.41	20.68	17.99	23.39	15.96	13.95	9.68	10.69	17.76
36. Morbi mentis	139	50	62	20	11	.....	4	29	50	4.59	3.60	3.55	4.07	6.50	.....	3.23	7.75	3.76
37. Morbi oculi	261	141	153	45	19	4	9	26	99	8.61	10.16	8.77	9.15	11.23	5.58	7.26	6.95	7.45
38. Morbi systemat. urin. et sexual (excluding venerie et syphilis)	249	138	130	54	19	6	6	26	113	8.22	9.94	7.45	10.98	11.23	8.37	4.84	5.95	8.51

INTERNATIONAL TABLE VIII.—*Most important diseases, by months (enlisted men), 1914.*

Diseases of the international nosological table.	Admissions by months.											
	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.
1. Alkoholismu acutus, including delirium tremens	106	72	100	96	104	105	124	97	85	102	90	103
2. Appendicitis, typhilitis, and perityphilitis	54	49	56	66	56	66	75	65	48	48	60	61
3. Bronchitis acuta	337	393	408	247	229	183	134	163	140	151	172	275
4. Cholera Asiatica												
5. Cholera nostras								1		1		
6. Diphtheria et croup	3	5	10	2	1	5	1	1	1	9	1	5
7. Dysenteria	10	29	15	10	28	41	32	32	20	35	17	21
8. Erysipelas	2	7	3	3	6	4	6	1	3	1	2	2
9. Febris intermittens (malaria)	74	43	70	61	72	118	117	144	177	92	65	78
10. Febris recurrens												
11. Fractura ossium	79	87	100	90	93	68	96	81	108	113	99	99
12. Gonorrhea	441	395	421	360	386	413	411	426	407	496	434	486
13. Hernia	33	28	33	28	27	31	34	26	30	47	28	28
14. Influenza	113	127	194	161	64	67	49	47	47	43	68	92
15. Insolatio (Hitzschlag coup de chaleur)				1	2		1	2	1		2	
16. Luxationes articulorum	15	14	15	10	18	16	20	23	21	26	24	19
17. Meningitis cerebro-spinalis epidemica	4		3	2	1	1	1		3		1	1
18. Morbilli	47	62	142	112	78	56	22	2	10	4	3	12
19. Parotitis epidemica	74	156	254	137	82	38	12	6	3	4	1	9
20. Pleuritis	23	16	25	17	14	17	18	22	24	21	21	15
21. Pneumonia crouposa sive lobaris	33	25	32	16	17	7	14	8	6	13	13	12
22. Rheumatismus, articulorum	64	53	55	51	44	36	26	31	30	29	33	43
23. Scarlatina	2	2	2	2	1	2	1	2	3	3	6	3
24. Scorbutus								1				
25. Syphilis	254	201	225	181	154	147	150	159	135	126	123	152
26. Trachoma	2			2				5	2			1
27. Tuberculosis, pulmonum	20	19	24	23	21	23	26	23	24	29	16	12
28. Tuberculosis ceterorum organorum	7	5	3	5		1	2	2	1	3	1	2
29. Typhus abdominalis		1	1			1	1		1		1	1
30. Typhus exanthematicus					1							
31. Ulcus molle	175	141	192	156	197	235	269	268	236	243	248	212
32. Variola	4	2				1						
33. Morbi auris	30	43	53	36	46	40	48	55	47	40	44	48
34. Morbi cordis	11	14	16	14	5	11	13	7	10	13	9	15
35. Morbi cutis	108	89	121	109	135	168	142	156	119	120	111	130
36. Morbi mentis	37	14	32	35	28	35	27	28	29	35	30	35
37. Morbi oculi	55	62	71	69	79	67	57	62	53	54	59	69
38. Morbi systemat. urin. et sexual (excluding venerie et syphilis)	62	44	67	70	57	54	78	88	51	61	56	53

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INTERNATIONAL TABLE IX.—*Deaths by rank, by length of service, and by age.*

Causes of death.	Total number of deaths (enlisted (men.		Deaths by rank and length of service.				Deaths by age.					
	Absolute numbers.	Per 1,000 of mean strength.	Noncommissioned officers.	Soldiers in first year of service.	Soldiers in second year of service.	Soldiers in third year of service and over.	20 and under.	21 to 25.	26 to 30.	31 to 35.	36 to 40.	41 and over.
Deaths from sickness	208	2.36	54	46	13	95	16	69	30	24	23	46
Soldiers present with troops	116	1.32	30	26	10	50	12	33	15	13	15	28
Soldiers absent from troops	92	1.04	24	20	3	45	4	36	15	11	8	18
Accidental deaths	140	1.59	23	39	16	62	11	50	44	18	10	7
Soldiers present with troops	107	1.21	22	37	13	35	11	39	36	8	6	7
Soldiers absent from troops	33	.37	1	2	3	27	....	11	8	10	4	....
Suicides	44	.50	13	9	1	21	2	7	10	15	5	5
Soldiers present with troops	37	.42	12	6	1	18	1	5	9	14	3	5
Soldiers absent from troops	7	.08	1	3	....	3	1	2	1	1	2	....
Total	392	4.45	90	94	30	178	29	126	84	57	38	58

INTERNATIONAL TABLE X.—*Discharges from the Army for physical disability, temporary or permanent, by rank, length of service, and by age, 1914.*

Causes of discharge.	Total number of discharges (enlisted men).		Rank and length of service.				Age.					
	Absolute numbers.	Per 1,000 of mean strength.	Noncommissioned officers.	Soldiers in first year of service.	Soldiers in second year of service.	Soldiers in third year of service and over.	20 and under.	21 to 25.	26 to 30.	31 to 35.	36 to 40.	41 and over.
Physical disability existent prior to enlistment	656	7.44	7	458	106	85	95	393	110	48	6	4
Physical disability incident to service	399	4.53	64	77	69	189	24	167	102	52	34	20
Physical disability not incident to service	90	1.02	7	20	12	51	4	38	22	16	5	5
Total	1,145	12.99	78	555	187	325	123	598	234	116	45	29

Very respectfully,

W. C. GORGAS,
Surgeon General, U. S. Army.

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